COLUMBIA BASIN TRUST

COMMUNITY PLANNING SYMPOSIUM

MAY 10 – 11, 2004

KIMBERLEY, BRITISH COLUMBIA

SUMMARY REPORT

October 2004

Doug Switzer
Columbia Basin Trust

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Columbia Basin Trust
Community Planning Symposium
May 10 – 11, 2004

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Community Planning Symposium
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HISTORY/SUMMARY

As a part of their mandate, the Columbia Basin Trust's Social Sector Steering Committee has always been interested in the issue of social planning in the Basin. Historically, the Committee has been charged with both recommending programs to the CBT Board of Directors as well as actively managing programs for the CBT. The Committee recognized early in their work that Basin-wide planning was necessary to gain the maximum effect from the limited resources available.

In order to better understand the current planning resources available to the Basin and to better plan the symposium, the Committee contracted with VisionLink Consulting in 2002 to complete two pieces of work. The first was an inventory of organizations, individuals and companies who were either involved in community planning or shared an interest in planning activities. A copy of the Social Planning Inventory for the Columbia Basin is attached in Appendix I. Information related to community planning activities was gathered through the use of telephone interviews and surveys.

In addition to completing the inventory, VisionLink compiled information from respondents about the viability of CBT or some other organization developing a larger planning initiative. With a couple of exceptions and some reservations, the majority felt that there could be value in a larger planning initiative and, further, that CBT had the resources to begin this process.

It is recognized that, although the Canadian portion of the Columbia River Basin is linked by the Columbia River, this portion of the Basin historically has not been recognized by provincial or federal governments as an entity, until the creation of the CBT. For this reason this research found that in addition to the shared geography associated with the river there remained very distinct regions, with varied approaches to planning and many different government offices providing service to the area. The CBT was frequently mentioned as an appropriate mechanism to initiate a larger planning initiative, as CBT's mandate covers the entire region.

The Committee then decided that a Community Planning Symposium would be the first step and VisionLink Consulting then undertook the task of arranging for potential

speakers and presenters. In time, a list of presenters from throughout Western Canada and Australia were invited to speak at the symposium and location, dates and invitations were sent out. Invitations were sent to a wide variety of community interests, including social organizations, health authorities, local governments, First Nations, educational institutions, economic development organizations and other interested community members.

A copy of the full agenda is attached in Appendix II.

On May 10 – 11, 2004, 104 participants, presenters and CBT staff met at the North Star Centre in Kimberley, B.C. to begin the process of reviewing the concept of community planning in the Columbia River Basin. Over the two days, community planners from throughout Western Canada and Australia presented research, identified working models and presented practical examples of their experiences in the field of community planning.

Some time was devoted to examining the Basin and participants were asked to provide some feedback regarding the types of activities that could be undertaken in the Basin, as well as the types of indicators that could be tracked to assist in this work. The responses are listed later in this document.

On the second day of the symposium, participants were asked to break into groups to reflect on four questions:

1) *What types of activities could be undertaken that might assist us in community planning;*
2) *What would be the key objectives of this planning and;*
3) *What type of model or structure would best suit planning in the Basin?*
4) *What indicators would you most like to see monitored to help ensure quality of life?*

The answers were recorded and reported back to the larger group. These written responses are recorded below:

Question 1) What types of activities could be undertaken that might assist us in community planning?

- Follow-up (to symposium) activity
- Basin-wide newsletter – strengths and opportunities
- Social planning needs assessment, Basin-wide
- Asset mapping catalogue
- Tools/templates developed and shared
- Basin wide "federation/council of communities"
- Effectively engaging other sectors
- CBT as a catalyst for Community Development initiatives

- Cross-sectoral activities
- Funded position to facilitate planning
- CBT funded initiatives – variety of approaches (not top down) – Community context
- Informal dialogues with economic and other sectors – environment, health, arts and culture, grassroots
- Forums for sectors and public to meet together and create partnerships and do social planning
- Economic planning is essential component
- Ensure that CBT is not top down (government)
- Respect uniqueness and diversity of each community and support where they are at
- Structure in the Basin to link resources electronically and resources to support on-going efforts
- Make linkages with colleges to do research Basin-wide
- IHA, HRDC – pull reports together
- Opportunities to learn from Aboriginal experience and work together on shared interests
- Concern: all paid staff and boards are under tremendous pressure.
- Planning and communication are compromised - there must be additional funding
- Database (to persuade decision makers)
- Build "health" to a broader definition
- Community capacity builders/facilitators/practitioners (networked in Basin and networked internationally. Working with a team, find the talents in the region, do exchanges, partnered and working together in and out of the community:
    - to bring people together
    - to report on progress
    - support for fundraising
    - to advocate to address political issues
- Small groups at the community level to self organize to do indicators and projects
- 5 areas/factors: environment, physical, social, economic, cultural to get stats on communities to identify problems and skills development gaps
- Get funding to look at best practices – what's worked in similar
- Communities in areas around youth issues, forestry, community issues
- Get a broader involvement from various sectors in the community such as business, education, local politicians through forums such as this
- Information disbursal – to the public – what's out there
- Information disbursal – to providers – who has done what – where does the expertise lie – but limit the function to this – do not become a quasi academic repository of paper
- Do not become a think tank or institute of study – focus on action

- Capacity building resource to more local social planning councils – most of this type of activity is not suited to a Basin wide approach – we are too diverse and the work needs to happen within smaller geographic regions first but.....
- There is one social planning role that would be good to do at a Basin level and that is lobbying the province for more control locally re social spending – a regional voice in any appropriate milieu
- One more possibility – take on consciousness raising activities across the Basin – education of the general public about social issues – shifting attitudes or the Basin culture to a focus on social issues as a priority, not a side line after we look after economic issues
- Need to communicate with folks and social visionaries
- Need to communicate with local governments
- Determine constituents who should be included and information needed to make a decision or act on a social initiative
- Approach process o social planning as a learning experience for everyone involved
- Start at a local level to bring together diverse groups to identify strengths and issues
- Establish a body to look at bigger picture and coordinate information from these focus groups (a SPARCS type of organization at the Basin Level)
- Focus of social planning is how to strengthen communities – not trying for more services, trying to enhance possibilities for communities
- Asset mapping
- Practitioner model as in the Australian model, that provides discretionary dollars at the community level and at smaller isolated communities
- Hire a regional social planner (FACIT – East / CYFC Regional – West):
    - to pull effort of groups together
    - to initiate things, make them happen the community
    - to "Social Plan" – support, develop and implement
- If there isn't a social planning group functioning in a community, then maybe CBT could support getting this going by:
    - Bringing all players together (like the Symposium) in the communities
- CBT could provide someone who could facilitate groups and bring in business and provide leadership at meetings to facilitate meetings to ensure success
- First step is having social entities value social planning
- Enhance current activities
- Fear that basin-wide might mean "top-down approach"
- Need to get grounded – what activities are important to our communities?
- Who is the right group of people to answer this question:
    - Service users
    - First voice
    - Community members

  - People who can see the "big picture"
- Focus on services might be missing the point
- Issue of relevance of issue to communities
- There is a need for participatory action approach with importance of key organizations taking leadership role
- More local = more successful
- Need for the infrastructure to be funded
- Some projects could be region-wide and some local
- Basin-wide might cause competition – frustration of East Kootenay not feeling they have a voice like the west Kootenay in the Basin
- With numbers, lose the individuality
- Basin-wide role – activist and more policy-minded role in order to impact the region
- SPARC is a lobbyist role (provincial role)
- Basin-wide:
  - Information sharing
  - Bringing in outside resources in order to deal with road blocks
  - Coordinating action
  - Policy influencing
- There is a role for CBT – capacity building, identifying gaps
- Local activities:
  - Transportation
  - Housing
  - Access to technology (high-speed internet)
  - Food security
- There is a role for service providers to conduct participatory research
- Identify who isn't at the table
- Determine:
  - What are quality of life indicators
  - Why do we live here
  - What is a healthy community
  - What are our values
- Have kitchen table meetings
- Have local initiatives with a consideration for valley perspectives
- Review to vision – does it reflect the broad population: "did we talk to the whole dog"
- How might this happen?
  - CBT funding/support
  - Partnerships
  - Municipalities could coordinate through official community plan development processes

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Question 2) What would be the objectives of a community planning process in the Basin?

- Education and consciousness raising, shifting attitudes (as last line above)
- Establish where we are at
- To make effective social change
- To not duplicate work, - share tools, knowledge
- Don't homogenize the Basin
- Improved health, in the broad sense, by improved social planning capacity
- People more hopeful and engaged
- Sustainability
- Long term time frame for realizing community dreams
- Facilitation of a healthy society
- Social revolution
- Determine shared interests
- Triple bottom line with healthy society at the center
- Objective and subjective data gathered eg. Community vitality index
- Development of community action groups to address social planning issues
    - could communicate with government
    - menu of issues to be tackled
    - CBT could offer financial support to these groups, ie, paid staff person
- Identifying strengths and weaknesses
- Promoting optimism about strengths locally
- Healthier better functioning communities
- Consult with communities to define values (to ensure community driven values)
- Educate communities about triple bottom line measure of well being (e.g. More wealth does not necessarily mean more happiness)
- Build relationships within community by fining areas of common interest
- Involve local government
- Never mind the consultation (we've done that) lets do one or two small social planning tasks (just do it!) the objective being to identify those tasks
- Centralized social research person/office in basin
- Look at connections between outcomes for local economic, social environmental sectors
- CBT establish a social planning resource bank (information on planning and information on existing statistical information) that involves cross-sector information
- Focus on social issues basin wide convincing business and environment that the focus on "Social" impact has a relationship to business and environment
- Key objectives through a coordinator:
    - Advocacy
    - Education

- Transportation basin wide
- Isolation of smaller communities and inequities
- Food and housing

Question 3) What type of model or structure would best suit planning in the Basin?

- CBT fund community-based, sub-region and Basin wide initiatives
- All sectors data collection
- Basin-wide and beyond "network"
- Locally based ??? defined by interested individuals – being mindful of administrative boundaries/jurisdictions
- Seed funding to create an appropriate community defined response
- Integrated social research
- Partnered support for community based activities
- Centralized clearinghouse
- Do at a local level and take to the basin/regional level
- CBT to fund practitioners in each area to help identify the issues at the local levels
- Sub-regional
- Basin wide
- Social planning needs to happen as the community defines the boundaries – not according to an imposed "region". The community may not identify with imposed "regions" but experience, expertise and lesson and ideas need to be shared, such as through CBT's done with the symposium (another opportunity to built partnerships and share expertise)
- BC Cooperative Association (building capacity)
- SPARC
  - Meeting place for ideas
  - Deliver services
  - Research
- Community Diversity
- Planner – could take lead from FACIT and CYFC's to take the ideas forward

Question 4) What indicators would you most like to see monitored to help ensure quality of life?
(Answers are listed by categories identified by the groups.)

Health Indicators

- early childhood development indicators

  - What are the factors that influence childhood development?
  - Discussed mother's working and other socio-economic factors – need to measure separately , can't assume related to ECD
- 10 – 13 year old group
  - sexual health
  - social, mental spiritual
- Social isolation – how many social contacts (versus paid)
- Absence (from work or school)
- Level of education – doesn't necessarily change attitudes, but does seem to be related to better lifestyle choices
- Literacy
- Income level
- Lifestyle habits – smoking, drinking, other addictions, exercise
- Immunization rates (children, seniors)
- Quality of relationships, length of relationships
- Optimism, resilience, feeling of control
- Hobbies, meaningful activities
- Qualitative – do you feel happy, do you feel strong
- Stress, grief, traumatic events (loss, death etc.)
- Job uncertainty/fear
- Negative indicators (chronic illness, disability, morbidity, mortality)
- Access to services

Other comments related to health:

- Need an ethics committee to help physicians
- (Need) capacity to collect and analyze and act on data

Environmental Indicators

- Micro or macro
- Environmentally safe air and water quality
- Human based/individual out
- Biodiversity (along with understanding)
- Ecological footprint
- Forest cover
- Species population counts (fish, birds, etc.)
- Levels of recycling/reuse/reduce, composting
- Reclamation levels
- Stop destructive practices
- Water use
- Solid waste disposal
- Power use by resource use

- Type of energy consumption
- Locally grown produce – sustainability of local economy
- Connection to the environment
- Level of environment knowledge at various ages
- Pollution – industrial, government, home-based
- Spiritual aspect – aboriginal, settler, global
- Environmentally sound gardening

Economic indicators

- Labour force participation (working age)
- Unemployment rate (working age)
- Self-employment
- Gender/age/First Nations
- # of new jobs created
- # of businesses "surviving" over time
- Support by community for entrepreneurs
- Socially responsible businesses
- % matching budgets cause related ie Cancer run T-shirts
- Living wage
- Levels of literacy, graduation rates/% adult learners
- Support for youth in employment training - # of, availability, access to
- # of co-op businesses
- # of businesses considering triple bottom line
- Leakage
- Meaningful employment for skilled workers in community
- Returning youth
- Deficit or surplus of youth migration
- Availability of extended medical coverage
- % of unionization
- Full-time employment availability
- Balance of work/leisure time & family time
- % of income spent on basic necessities – home, food, etc.
- Security of jobs
- Pressure job growth
- Business Vitality Index
- Participation in the labour force by age range
- # on Employment Assistance and Social Assistance
- # of hours required to meet basic needs at minimum wage
- New/renewal business licenses
- Adequacy of income for household needs
- Debt/income ratio by household

- Sales leakage (spending outside community)
- Infrastructure – sewer, water, public transport, airport, telephone/ADSL
- # accessing food banks
- Business plans – expansion?
- Demographic trends

Social/Community Indicators

- Measurement of affordable housing
- Breakdown of gender earnings
- Measurement of homelessness and inadequate housing
- Accessibility to childcare resources
- Amount of ethnicity in communities
- # of children in household
- Amount of multi-cultural resources
- Community mapping
- Measuring the cost of a food basket
- Measurement of the cost of travel if one has to receive treatment in a different region/city
- Tracking the # of families/individuals accessing food banks
- Measure of community resources that are safe/non-confrontative
- How many are waiting for services ie mental health
- Prediction of what the needs are for seniors in the next 5 – 10 years
- How many services are available in the communities
- How many children are in care (MCFD) whose parents have mental disorders
- # of programs are pro-active, provide resource fairs (?)
- Amount of alcohol sales in the community
- Measure of elder abuse/family violence, all forms of family violence
- What is the percentage of graduates who go out of the area to obtain post-
- Secondary education
- # of volunteer hours – break it down between who volunteers for sports or other activities as opposed to social activity
- # of individuals who access recreational activities
- # of organizations who deal specifically with environmental issues
- What makes you safe in your community
- Amount of time, goods, etc that the business community donates
- Amount of free activities for families
- # of individuals who access arts, cultural and accessibility and cost – is it accessible for everyone
- # of parks, green space
- Measurement of underutilized expertise in the community ie social worker working in a less skilled occupation

- # of youth activities ie drop-in
- Measure of political involvement ie voting participation
- How many people are living under the poverty line and then examine the economic disbursement per capita expenditure on social activities, arts, cultural, libraries by the local government.

SUMMARY

Over the course of the two days, the group heard some excellent presentations and reports and had the opportunity to begin the discussion about community planning in the Columbia River Basin. The symposium also provided a forum to begin sharing ideas from other parts of the region and the world and it gave the participants an opportunity to look at both their local regions as well as the Basin as a whole.

Many different ideas were brought forward from the discussion groups as indicated earlier in this document and a number of different players were identified as having a significant role to play in developing this work. One of the challenges now will be to develop consensus on what we may move forward, how this will be done and who will do it.

It was not anticipated that this event would develop a specific strategy for community planning but, rather, that it would be a means to assess interest in this work and that it would serve as a catalyst for moving forward. Many participants indicated in discussion and submissions, that the most important work was in the continued development of a concrete strategy for planning in the Basin. Many felt that the true success of the symposium would be measured in the follow-up, leading to the development of that strategy. This work is now ahead of us.

COMMON THEMES

There were a number of common themes that I have tried to distill in this section in an attempt to try to define the parameters for the next steps.

- Whatever is undertaken must be manageable and doable. Starting smaller initiatives may lead to greater success in the long run than trying to take on everything at once.

- There may be value to working at local levels as well as the Basin-wide level.

- The scope must be broad and not defined to social planning. There is a need to involve health, economic and environmental planners as well as local governments.

- There is a significant need for better research and information and information sharing could be improved.

RECOMMENDATIONS AND NEXT STEPS

The first step in continuing this work is the distribution of this report to all participants, presenters and members of the CBT Social Sector Advisory Committee. Everyone who receives the report, and other interested parties are invited to provide feedback to the Social Sector Advisory Committee via any office of the CBT or by emailing dswitzer@cbt.org.

As mentioned earlier, the symposium was not intended to provide us with a concrete plan for community planning in the Basin but, rather, to focus attention on the subject, gauge the level of interest in community planning and to provide us with an opportunity to begin this work. Many ideas came forward at the symposium and the task now is to focus our energies on those that will move forward toward effective community planning.

The CBT is committed to following up the work that began at the symposium and will continue to explore the concepts that were discussed in Kimberley. Currently, there are not sufficient resources available to host a follow-up event as large as the May, 2004 symposium, but the CBT is in a position to host smaller, regional meetings with members of the Advisory Committee, symposium participants and other interested parties. These meetings could be used to focus the discussions on a local level as well as developing a platform for a Basin-wide initiative.

We should continue to widen the scope from social/health planning to community planning by inviting increased participation from members of the economic/business community, environmental community, arts & culture, educational community and others. The work of the CBT Environment Advisory Committee has undertaken with respect to the "State of the Basin" reporting should be further examined and discussions with that Committee could be undertaken to help complement and possible integrate components of each initiative.

The CBT is also currently examining whether it is more practical to post the symposium and other community planning related information to the CBT website or whether it might be more appropriate to develop an alternate site that is devoted to community planning in the Basin. Feedback on this issue is appreciated, as well.

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The Columbia Basin Trust's Social Sector Advisory Committee welcomes any and all feedback about this report, the symposium or other issues related to community planning in the Columbia River Basin. The SSA Committee will be meeting next on November 5, 6, 2004 at an all-Sector meeting in Cranbrook and at that time, the Committee will have an opportunity to review feedback to date and to plan further for regional follow-up meetings. It is hoped that the regional meetings will have concluded prior to the next Social Sector Advisory Committee meeting which will be held in late spring, 2005.

Comments or enquiries may be directed to:

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List of Attachments:

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Appendix II: Invitation and Agenda for Community Planning Symposium
Appendix III: Presentations:
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- Sandra Goth – Social Planning Cowichan
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Appendix I

Social Planning Inventory for the Columbia Basin

- Social Planning Inventory for the Columbia Basin -

September 2002

Prepared for:

Columbia Basin Trust

Prepared By:

VisionLink Consulting

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Overview

According to the *Canadian Social Planning Network*, social planning organizations exist to build and strengthen community. This mission focuses on the social impact on individuals, families and communities of larger social, economic, political and cultural forces in society. It also encompasses advocating for the development of essential community and social supports as provided through human service systems.

The Social Sector Steering Committee of the Columbia Basin Trust is beginning an investigation of its potential role in social planning. A social planning inventory has been researched to provide a starting point in determining what related activities are currently happening in the Basin.
Possible future activities could include:

- Facilitating better coordination among those who deliver social services in a bid to improve social outcomes;
- Coordinating efforts to make the most of scarce resources and reducing isolation;
- Providing a strong regional voice to ensure that those in power understand local rural needs;
- Providing a broad-based forum for public education and advocacy on social issues.

The social planning inventory is organized by geographic area, starting with the larger regional organizations, covering off some community-based organizations and finishing with local government.

Although there are many activities related to social planning, this is not an exhaustive inventory, but strives to include enough examples of social planning-type activities to provide a realistic spectrum.

Information presented here was gathered throughout August 2002 through surveys and telephone conversations.

Emergent Themes:

- There appears to be no organization or coalition that focuses on "big picture" social planning – that is planning beyond a groups' particular area of interest (e.g. child care or geographic community);

- Between them, the organizations and coalitions included in this inventory cover a full spectrum of social issues and services (e.g. health, poverty, child care, literacy, community services, advocacy);

- There are few organizations / coalitions with a true Basin-wide focus (i.e. some larger scale groups may cover the whole Basin but as part of a wider region, e.g. the *Population Health Planning and Support Group*; some more regional groups cover off many, but not all, of the major communities, e.g. the *Columbia Basin Alliance for Literacy*); there are several organizations which cover the East and West Kootenay (e.g. *ANKORS*) but not the northern region, including Revelstoke and Valemount;

- The majority of organizations engage in social planning related to their area of interest and are service providers; therefore their planning efforts are often predominantly service-focussed;

- There is a mixture of formal (e.g. monthly meetings or annual planning retreats) and informal planning activities (e.g. conversations over someone's desk);

- Many informants struggled to understand the concept of "big picture" social planning;

- Local governments, as a rule, do not engage in social planning; at most they may have a few social policies included in their official community plans (e.g. libraries, health, housing);

- A couple of local governments (e.g. Rossland, Revelstoke and Kaslo) have been active in developing Community Economic Development Plans where social and environmental concerns are integrated with the more traditional economic ones. Even so, no focussed social planning function exists at the municipal level;

- Across the Basin a current major focus of organizations is a response to the recent government cuts;

- Survival (of organizations and services) is a prime focus and takes away time for larger picture planning of any sort;

- Available funding tends to drive the services of many organizations;

- Much collaboration between agencies currently exists where there are similar areas of focus; it is aimed at information sharing, some resource sharing and tends to be focused on planning services. There are some examples of a broader regional approach to this where local committees feed into a regional committee with the (the *Regional Child, Youth and Family Committee* in the West Kootenay and the *Regional Family and Child Issues Team* in the East Kootenay);

- Many organizations engage in ad hoc social planning when time and funding allow;

- There is interest in the creation of some kind of social planning support but there is an awareness that it may become agency driven with the associated conflicts of interest;

- There is interest in some kind of social planning function driven by the Columbia Basin Trust...

- Next steps could include:
  - An examination of relevant social planning models (external); and how to build on the existing networks in the Columbia Basin;
  - Discussions on the who, what, where related to CBT (staff, SSSC roles etc. – internal);
  - Discussions on feasibility related to above (resources available, including human and financial);
  - An examination of methods of involving communities and organizations;
  - Discussions on how to educate CBT and communities on social planning.

Regional Organizations and Activities:

Organization Name And Primary Contacts	**Population Health Planning & Support Group (Interior Health Authority)** Dr Nelson Ames Ruth Beck Nancy Macek	**ANKORS Kootenay Boundary AIDS Network** Karen Muirhead, ED
Contact Info	C/0 2nd Floor, 333 Victoria Street, Nelson, BC, V1L 4K3 Tel. (250) 354 6853 Fax. (250) 354 6304 Email nelson.ames@kbchss.hnet.bc.ca rbeck@netidea.com	WK/B Regional Office: 101 baker Street, Nelson, BC, V1L 4H1 Tel. (250) 505 5507 Fax. (250) 505 5507 EK Regional Office: #205 – 14th Ave N., Cranbrook, BC, V1C 3W3 Tel. (250) 426 3383 Fax. (250) 426 3221 Email info@ankors.bc.ca
Geographic Area	Interior Health Authority (Williams Lake to US border; Chilcotin to Alberta border)	South Eastern BC – Kootenay-Boundary regions
Who Else is Involved	Interior Health staff	Canadian AIDS Society, Pacific AIDS Network, Hep C Collaborative Circle, Canadian Harm Reduction Community, Volunteer Canada, West Kootenay-Boundary CYFC, Nelson Committee on Homelessness, Nelson Food Bank Group etc. Each of the ANKORS programs has individual partnerships and relationships specific to the program. The organization has larger collaborations as needed.
Social Planning Practises	Monthly meetings: teleconference and face-to-face	Planning is part of program implementation and evaluation (ongoing). Staff, Board and volunteers all attend to changes in government, social responses, health reports etc. and information is used to identify concerns, challenges and programming areas. Regular staff meetings, Board meetings and quarterly staff retreats.
Social Planning Focus	Increase knowledge Application of that knowledge to improve the health of both populations and individuals Increase effectiveness through collaboration.	Health, social services, poverty, addictions, support, advocacy, outreach to youth.
Mandate & Goals	To support and promote a Population Health approach within IHA: A Population Health approach strives to maintain or improve the health of the entire population and reduce gaps in the health status between population groups.	To ensure that our programs, services, outreach and advocacy programs address issues faced by our consumer groups and our communities. To engage all infected and affected populations at the table and in finding solutions that work within their community. The cornerstone of ANKORS programs is based on engaging communities to work with each other and our organization to address the complex issues that put individuals at risk for transmission, around service needs, health care, housing and income. ANKORS works with community partners to educate on and to address all the social determinants of health that affect people's lives.
Social Planning Activities: Past	Group created April 2002.	Development of Care Teams in each community/region that can work together for an individual and their family infected or affected by HIV/AIDS, Hep c. Research, needs assessments, program implementation for individuals living with HIV, AIDS, Hep c; individuals who use injection drugs; youth at risk; access to HIV testing etc. Education: programming available for all individuals, groups, organizations, service providers focused on their mandate and individual need;

		Prevention: services and programs designed to address challenges and concerns both focused on the underlying needs and the presenting issues; Harm reduction programming: needle exchanges, safer sex, sexuality; Community development: skills building, education, co-facilitation and presentation on a variety of topics as they relate to harm, poverty, safer decision making etc. Event promotion and support to local groups.
Social Planning Activities: Current	Proposal call and awarding of projects for 2002-03, ongoing research and data collection, establishing relationships and making connections both internal and external.	As above While programming intent and focus does shift, it is primarily to address additional forms of the same issue. E.g. ANKORs has been selected to work with the National Harm Reduction Conference; an individual who was connected to the injection-drug-using community has been hired to do a local needs assessment and provide feedback on needs, issues, concerns and challenges at the Nov. conference in Toronto.
Social Planning Activities: Future	Region-wide conference (Nov. 2003).	Initiating harm reduction and needle exchange programming for the East Kootenay Development of relevant and real responses to the needs of those who are street-involved, who live in poverty, rurally, who are isolated and in need of health care outreach at a basic street level; Housing issues for those who are living with chronic and fatal disease; Working with other HIV/AIDS organizations in the Province to address the lack of a provincial strategy; Renewal of the Canadian Strategy on HIV/AIDS Renewal of the federal commitment to deal with the issues facing those living with Hep .

Organization Name And Primary Contacts	**Columbia Basin Alliance for Literacy** Leona Gadsby, East Kootenay Coordinator Jennifer Cliff-Marks, West Kootenay Coordinator	**Canadian Red Cross Society** Chris MacPherson, Service Area Manager John Richey, Regional Director (Kelowna)
Contact Info	PO Box 580, Invermere, BC, V0A 1K4 Tel. (250) 342 3210 / (250) 265 4193 Fax. (250) 342 9221 / (250) 265 4195 Email lgadsby@cotr1.cotr.bc.ca Jcliff-marks@thehub.capcollege.bc.ca	625 Columbia Ave., Castlegar, BC, V1N 1G9 Tel. (250) 365 3911 Fax. (250) 365 6242 Email. Chris.macpherson@redcross.ca
Geographic Area	Columbia Basin (17 communities)	East and West Kootenay
Who Else is Involved	East Kootenay Childhood Coalition West Kootenay-Boundary Child Care Council Community-based Literacy Advisory Committees (form the CBAL Coalition) Schools, wide variety of community / health agencies; First Nations	Under direction of Regional Council, regional consultation with key community members and Red Cross volunteers; Input provided to Western Canada Zone Council; BC Southern Interior staff
Social Planning Practises	In each community local Advisory Groups meet monthly / quarterly / less often. Annual joint meeting (Sept) to plan programs; Annual joint meeting (spring) to assess and evaluate; Ongoing support and advice; daily communication between 2 coordinators. West Kootenay and East Kootenay groups try to meet 2-3 times/year.	Quarterly informal reviews Annual formal review process.
Social Planning Focus	Literacy	Help people deal with situations that threaten their survival and safety; their security and well-being; their human dignity.
Mandate & Goals	To promote literacy and lifelong learning throughout the Columbia Basin by educating the public about the importance of literacy and by supporting local community actions related to literacy.	People and communities plan and prepare to reduce the suffering and loss resulting from disaster. People are aware of and responsive to the needs of others in situations of conflict / disaster, and are willing to share resources to assist in building community capacity throughout the world. People build and experience a more tolerant and civil society in which inequities and the incidence of harassment, abuse and violence are reduced. People act cooperatively to reduce unintentional illness, injury, disease and death.
Social Planning Activities: Past	Literacy Community Planning sessions in Revelstoke and Nelson	Regional and Zone councils Program and regional business plans Vulnerability / capacity assessments Reviewing are, BC, Canadian reports and stats
Social Planning Activities: Current		Community consultations Regional Council input Vulnerability / capacity assessments Review of reports and stats Environmental scans Program and regional business plans Impact Analysis of government social program cuts.
Social Planning Activities: Future		More frequent community consultation meetings Analysis of current program impact (i.e. evaluation of RespectED: Violence and Abuse Prevention program).

Organization Name And Primary Contacts	**West Kootenay-Boundary Regional Administrators' Group** Kim Adamson, Chair	**West Kootenay-Boundary Child Care Planning Council** Judy Pollard, Chair Cathy Paton, Coordinator
Contact Info	C/o West Kootenay Family & Childcare Society, 912 Carbonate St., Nelson, BC, V1L 4R4 Tel. (250) 352 5557 Fax. (250) 352 4698 Email. wkfacs@direct.ca	C/o West Kootenay Family & Child Care Services 312 Silica Street, Nelson, BC, V1L 4M5 Tel. (250) 352 6678 Fax. (250) 352 6144 Email. cpaton@salmobc.com
Geographic Area	West Kootenay-Boundary	West Kootenay – Boundary
Who Else is Involved	EDs of 10 multi-service non-profit societies (Trail FAIR; Castlegar Community Services; West Kootenay family Place; Nelson District Community Resources Society; Nelson Community Services; Nelson Family Place; Salmo Community Services; North Kootenay lake Community Services, Arrow & Slocan Lakes Community Services; Boundary FAIR)	MCFD MHR Child Care Licensing Selkirk College Supported Child Care Child Care Resource & Referral Child Care Providers East Kootenay Child Care Planning Council
Social Planning Practises	4 hour meeting every 6 weeks.	Meet quarterly.
Social Planning Focus		To share information re. child care organizations, issues, concerns and new developments. To make recommendations re. child care policies and programs for the regional, provincial and federal governments.
Mandate & Goals		To provide a voice for child care in the region. To provide an effective regional link between organizations and individuals who work to ensure that the needs and interests of young children receive priority in our communities and region.
Social Planning Activities: Past	Sharing of info on contract matters, mutual sharing of info with MCFD.	Strategic Planning sessions (1997 and 2002) Training for Council members in "The Early Years – Investing in Children"
Social Planning Activities: Current	Focus on survival of community-based, non-profit delivery of social services (not necessarily agency survival), development of a governance structure that would be compatible with new MCFD governance structure and exploration of regional cooperative as a service delivery, regional contracting body. Have begun to make connections with East Kootenays re. governance and service delivery planning.	Child care advocacy (ongoing) re. gov't changes (priority) Ministry meetings to have input re. child care licensing changes; brought in parents with concerns. Sub-Committee for Supported Child Care – ongoing advice.
Social Planning Activities: Future		Education re. early childhood – piece on early development; Link with elementary schools to ease transition from daycare/preschool.

Organization Name And Primary Contacts	**West Kootenay-Boundary Regional Hospital District** Larry Robinson, CAO Elaine Kumar, Deputy	**The Advocacy Centre** Carol Ross
Contact Info	843 Rossland Ave., Trail, BC, V1R 4S8 Tel. (250) 368 9148; Fax. (250) 368 3990 Email: ekumar@rdkb.com	501 Front Street, Nelson, BC, V1L 4B4 Tel. (250) 352 5777; Fax. (250) 352 5723 Email advocacy@direct.ca
Geographic Area	All of RDKB and RDCK	West Kootenay Boundary
Who Else is Involved	Directors of the 2 RD Boards	West Kootenay Women's Council Nelson Committee on Homelessness Nelson Food Coalition Anti-Poverty Action Group BC Assc. Of Social Workers (W. Kootenay) BC Assc. Of Specialized Victim Assistance & Counselling programs End Legislated Poverty Regional Advocates
Social Planning Practises	Formal meetings 3 times per year	Formal annual meeting as whole agency Annual sector planning Regular informal planning Planning as part of Nelson District Community Resources Society
Social Planning Focus	Capital funding for hospitals	Elimination / reduction of poverty Creation of affordable housing Local / regional service needs of women and children Community safety / crime prevention Equality; discrimination reduction; Child protection; general social justice / social change; access to justice; information and education.
Mandate & Goals	Governed by the Hospital District Act.	As above
Social Planning Activities: Past		Regional planning for services to women and families; women's access to safety; establishment of Transition House; access to food and shelter; subsidized housing; advocacy (ongoing).
Social Planning Activities: Current		Food distribution; homelessness; legal services; access to advocacy; responding to cuts; regional collaboration.
Social Planning Activities: Future		

Organization Name And Primary Contacts	**West Kootenay Regional Child, Youth & Family Committee** Jim Fenning, Chair	**East Kootenay Regional Family and Community Issues Team (FACIT)** Gary Dalton, Standing Chair
Contact Info	C/o West Kootenay Boundary Addictions Services Tel. (250) 354 4121 Fax. (250) 354 4183 Email. director@wkbas.ca	C/o ANKORS 205 – 14th Ave. N., Cranbrook, BC, V1C 3W3 Tel. (250) 426 3383; Fax. (250) 426 3221 Email: Garyankors@telus.net
Geographic Area	West Kootenay-Boundary	East Kootenays
Who Else is Involved	3 subcommittees; Early Intervention, Youth, Policy & planning	Each EK community has a local FACIT with membership including service providers, community members and service recipients. Community FACITs are in various stages of development and each sends a representative to the regional FACIT.
Social Planning Practises	Monthly 4 hour meetings	Monthly meetings
Social Planning Focus		Identifying needs and goals of families through information sharing; Advocating on behalf of the people, communities and region; Providing input into planning processes and identifying regional priorities; Advising funding authorities on the allocation of financial resources. Providing input on decisions that have a significant impact on regional services delivery; Accessing the outcomes of the review and evaluation of programs and services; Providing a forum in which resources (financial and human) can be shared; Initiating and supporting 2-way communication between funding authorities, regional FACIT and community FACITs; Accessing and providing input to program proposals submitted to funders.
Mandate & Goals		The EK FACIT comes together as representative voices in partnership to develop, enhance and strengthen the social, economic, environmental and physical well being of the people of the East Kootenay. To support the development, implementation and evaluation of services which address the needs of the people in the East Kootenay. To support the delivery of services which are relevant, equitable, effective and efficient.
Social Planning Activities: Past	Youth subcommittee has focussed on advocacy for services and response to service cuts. Early Intervention has focussed on events such as presentation by Mary Gordon (Roots of Empathy) in spring 2002. Planning subcommittee (overlaps substantially with West Kootenay Boundary regional Administrators Group) has focussed on producing draft regional service delivery model for discussion purposes, and comprehensive list of regional services.	Enhanced communication throughout the East Kootenay; Helped to reduce duplication of services; Reduced competition for resources; Assisted with community mapping and needs identification; Has become a recognized regional advisory body. 3 regional conferences (strategic planning).
Social Planning Activities: Current		Planning meeting with MLAs and MPs Seeking funds to support regional activities and face-to-face meetings; to hire a Community Liaison Consultant.

Organization Nam And Primary Contacts	**East Kootenay Child Care Resource & Referral** Kim Levie, Rita Romeo, Susan Rad	**East Kootenay Alcohol & Drug Counselling** Jan Greenfield, Administrator Arnold Lowden, Chair
Contact Info	20B 12 Avenue N., Cranbrook, BC, V1C 3V7 Tel. (250) 426 5677; Fax. (250) 426 3373 Email: ekccrr@shaw.ca	Suite 202, 1617 Baker St., Cranbrook, BC Tel. (250) 489 4344 Fax. (250) 489 1020 Email. jangreen@cintek.com
Geographic Area	East Kootenays (Cranbrook, Kimberley, Elk Valley, Invermere Valley, Creston Valley)	East Kootenays
Who Else is Involved	Cranbrook Women's Resource Society Women's Centre Child Care providers of the East Kootenay Supported child Care CAPC	Staff and Board Prevention Planning Committee Addictions Alberta Addictions Ass. Of BC
Social Planning Practises	Monthly meetings for community committees Monthly internal staff meetings Monthly organization meetings	Weekly staff meetings Monthly meetings with Board Yearly meetings with individual staff
Social Planning Focus	Child care, children and families	Dealing with addictions of all kinds in the whole population. Focus on outcome measures to find out of goals are being achieved....if not look for ways to improve.
Mandate & Goals	Working in partnership with community and Government to enhance the availability and accessibility of a range of flexible, responsive and inclusive quality child care options and services that support the needs of children, families and child care providers.	To provide excellent services to clients suffering from drug and alcohol addictions in the East Kootenay.
Social Planning Activities: Past	Child care month (May); Teddy bear picnics; Angel tree program; School Preparedness Fairs; Support to child care providers.	Identified gap in service for men; (has developed a safe place for women for detox); developed proposal for men, accepted by Board. 1 year pilot program launched.
Social Planning Activities: Current	See above	Seeking funding to continue men's project.
Social Planning Activities: Future	In process.	Cocaine is emerging as youth problem. Need to develop local detox facility (currently have to travel to Prince George).

Organization Name And Primary Contacts	**East Kootenay Child Care Planning Council** Betty Carmelo, Co-Chair	**Circle of Habondia Lending Society** Laverne Booth, Secretary Barbara Brown, Treas. Hannah Hadikein
Contact Info	C/o East Kootenay Child Care Resource & Referral 20B – 12th Ave. N., Cranbrook, BC, V1C 3V7 Tel. (250) 426 5677 Fax. (250) 489 4585 Email ekccrr@shaw.ca	Box 143, Crescent Valley, BC, V0G 1H0 Tel. (250) 355 2868 Fax. (250) 359 7617
Geographic Area	East Kootenays	Slocan Valley, Nelson, Castlegar
Who Else is Involved	Regional community partners Child care providers; Parents West Kootenay –Boundary Child Care Planning Council	6 Board members, 25 paid members and 75 on contact list.
Social Planning Practises	Meetings 3-4 times/year	Monthly Board meetings Quarterly planning meetings (half or full day)
Social Planning Focus	Child care	More Community Economic Development than social planning. Management of micro-loan fund; Educational needs of women re. financial management; Community needs: family issues, e.g. conflict resolution skills, organic food production; Approaches to private investor, potential funders; Event planning; Collaboration with other agencies to meet the needs of members, families, communities.
Mandate & Goals	The EKCCPC will lead and coordinate child care planning in the East Kootenay Region: To support children and families to have access to a wide variety of high quality child care options that are appropriate to the range of their needs; To support service providers to obtain adequate resources to provide quality child care services; That government and public be aware of the benefits of quality child care and support them; Regional coordination of the development and delivery of child care funding.	To establish and maintain a community loan fund that is accessible and equally available to all members. To explore and celebrate abundance; to pool and share resources; to organize and participate in activities that empower ourselves, our families and our community. To help other groups establish loan funds in conjunction with the credit unions that help get money circulating and contribute to economic well-being and sustainable development in communities.
Social Planning Activities: Past	Sept 1999 –meeting of child care professionals was held at the College of the Rockies. Approved their mission, purpose etc. and came into being in June 2000.	Collaboration with Nelson Health Council to plan local project: gleaners club; Collaboration with WE Graham Community School to train community members in conflict resolution skills, internal Board development and 3 year planning exercise; Regular planning of educational and fund-raising events.
Social Planning Activities: Current	Plan services and address child care issues in the region; explore new directions and alternatives for the development of child care services in the region; to play an advisory role to governments and organizations re. child care; to develop linkages to promote education about child care; provide a regional child care assessment and plan that encompasses both community and family perspectives on the development of child care resources and support	Analysis and development of loan fund (policies); Presentations to potential investors.; expanding funding sources to hire loans officer; Collaboration with Nelson Women's Centre to plan Kootenay Women's Festival (Aug 02); Collaboration with WE Graham Community School to get restorative justice program funded.
Social Planning Activities: Future	See above – ongoing activities	As loan fund grows, need to hire a part-time loans officer (working on grant applications); Board will prepare and present for approval to members a series of policies and organizational re-structuring.

Organization Name And Primary Contacts	**Ktunaxa/Kinbasket Tribal Council** Debbie Whitehead, Director of the Social Sector
Contact Info	7468 Mission Road, Cranbrook, BC, V1C 7E5 Tel. (250) 489 4563 Fax. (250) 489 4585 Email. dwhitehead@kktc.bc.ca
Geographic Area	5 First Nations communities
Who Else is Involved	Akisqnuk First Nation (Windermere) Lower Kootenay Band (Creston) Shuswap Band (Invermere) St Marys Band (Cranbrook) Tobacco Plains Band (Grasmere) Ktunaxa Kinbasket Wellness Centre (Creston) Healthy Communities Committees
Social Planning Practises	Twice yearly meetings.
Social Planning Focus	Population Health and community development. Healthy Communities Committees: - health; education; justice; CFs; employment; wellness.
Mandate & Goals	Community development: Resource identification; capacity-building; family growth plans.
Social Planning Activities: Past	Complete SWOT – vision development, social sector evaluation, model planning, population health.
Social Planning Activities: Current	Database design; family growth; social sector re-build.
Social Planning Activities: Future	Family growth planning; community profiles; sector planning and coordination.

Community-based Organizations and Activities (East Kootenay):

Organization Name And Primary Contac	**Kootenay Employment Services** Donna Carlyle, Manager	**Creston & District Community Resource Centre Society** Serena Naeve, ED
Contact Info	Box 548, Creston, BC, V0B 1G0 Tel. (250) 428 5655; Fax. (250) 428 5336 Email. kesadmin@kes.bc.ca	Box 187, Creston, BC, V0B 1G0 Tel. (250) 428 5547 Fax. (250) 428 5175 Email cresource@kootenay.com
Geographic Area	Yahk to Riondel	Creston & area
Who Else is Involved	All internal program staff	Local FACIT Committee Regional FACIT Different agencies partner on different issues as they arise.
Social Planning Practises	Annual planning meeting	30 staff meeting in special interest groups and to develop proposals for funding (as needed basis).
Social Planning Focus	Client inventory; client needs; services available; voids in services; action plans to enhance social programs and benefits.	Local FACIT: suicide awareness (public education forums) Elder abuse Planning re. cutbacks and how Creston will cope with changes.
Mandate & Goals	To contribute to the ongoing growth and integrity of our community by providing dynamic employment services.	We work on an idea, create a vision and work towards achieving our goals.
Social Planning Activities: Past	Community visioning; KES annual planning sessions.	
Social Planning Activities: Current	KES annual planning session.	Local FACIT: Depression Forum (Oct. 02) Suicide awareness forum (Nov 02) Surviving and healing forum (Nov. 02)
Social Planning Activities: Future	KES annual planning session.	Family Place initiatives

Organization Nan And Primary Contacts	**Creston Valley Early Childhood Coalition** Dina Kastelan Mary Jean Searle	**St Mary's Indian Band** Larry York R. Manjak
Contact Info	C/o Box 187, Creston, BC, V0B 1G5 Tel. (250) 428 0218 Fax. (250) 428 0218 Email crescapc@kootenay.com	7470 Mission Road, Cranbrook, BC Tel. (250) 426 5717 Fax. (250) 426 8935
Geographic Area	Yahk to Crawford Bay	St Mary's Indian Band
Who Else is Involved	CAPC Child care providers Literacy and parent support Public Health Creston Community Resource Centre Society School District	Internal departments Ktunaya/Kinbasket Tribal Council Child & Family Services / Health Services Ministry of Children & Families
Social Planning Practises	Meet on an as-needed basis. Any member can call a meeting.	Annual planning for social departments; Monthly departmental meetings Bi-weekly team meetings
Social Planning Focus	Guiding Creston Valley Family Place Development (new centre).	Improved life style for community members and families.
Mandate & Goals	Nothing formal – came together with a common need to develop a centrally located accessible space in which programs could coordinate their services to families with young children.	
Social Planning Activities: Past		
Social Planning Activities: Current	Guiding development of Creston Valley Family Place	
Social Planning Activities: Future	Development of future services for families with young children. To link additional programs and community organizations with an interest in strengthening our community's capacity in supporting families with children birth through 6.	

Organization Nam And Primary Contacts	**Summit Community Services Society** Cam McCallum Gayle Webb	**Cranbrook Planned Parenthood** Linda Douglas, Supervisor
Contact Info	100 – 125 10th Ave. South, Cranbrook, BC, V1C 2N1 Tel. (250) 489 5300 Fax. (250) 489 3151 Email c.mccallum@ekfamilies.com	Fax. 9250) 427 5316
Geographic Area	Cranbrook, Kimberley and surrounding areas	Primarily Cranbrook (education services to other east Kootenay areas when funding can support it).
Who Else is Involved	All internal departments	Cranbrook Family Centre Public Health
Social Planning Practises	Developed a 5 year rolling plan, with annual plan being reviewed once/year Annual planning meeting including Board and staff. Board reviews plan quarterly Staff update planning activities at monthly meetings.	Very informal – usually initiated when funding is available for specific projects. No ongoing funding for supervisor to be involved in social planning.
Social Planning Focus	Providing direct service to clients through family support and intervention programs.	Teen pregnancy; reproduction health as a community issue; quality and lack of health services for women; peer-to-peer counselling.
Mandate & Goals	Society is dedicated to promoting community well-being by providing a continuum of quality, accessible, client-centred support and intervention services.	
Social Planning Activities: Past	Annual retreat Board/staff planning session Use of a professional facilitator Involvement in an organization carrying on planning for the community.	Involved on ad hoc basis with Mt Baker High School looking at the issue of teen pregnancy Some preliminary discussion with Better babies staff.
Social Planning Activities: Current	Annual plan development within a 5 year plan framework Participation in the Child Care Planning Council Financial planning to further develop social programs.	Recently funded project through CBT
Social Planning Activities: Future	Continue above activities Continuous quality improvement planning within the context of our Accreditation activities.	Peer-to-peer counselling.

Organization Name And Primary Contacts	**Fernie Women's Resource and Drop-in Centre** Debbie Johnson	**Family Resource Centre of Invermere / Community Vision Action Team** Pat Cope, Executive Director
Contact Info	Box 2054, Fernie, BC, V0B 1M0 Tel. (250) 423 4687 Fax. (250) 423 3633 Email fwrc@elkvalley.net	Box 2289, Invermere, BC, V0A 1K0 Tel. 9250) 342 6765 Fax. (250) 342 3850 Email frc@rockies.net
Geographic Area	Fernie and area	Canal Flats to Spillimacheen
Who Else is Involved	30 members	MCFD Alcohol & Drug Churches Youth services (e.g. probation); family services Community health Literacy groups Mental health Regional FACIT
Social Planning Practises	Monthly meetings	Monthly meetings (summer recess)
Social Planning Focus	Women's resources Community development Family resources	Wellness: promoting and supporting the wellness of individuals, families and communities.
Mandate & Goals	To provide unconditional support to women and their families in the Fernie area. Provide resources and referrals to women as well as a place to meet and plan for action. Take an active role in the new OCP being developed for the City of Fernie. Carry out activities that will lead to public transit for the Elk Valley. Initiative the development of affordable housing and support for such. Work on safer communities.	To support the development, implementation and evaluation of services which address the needs of the people of the Invermere area. To support the delivery of services which are relevant, equitable, effective and efficient.
Social Planning Activities: Past	Developed affordable housing Advisory Committee member for development of OCP Founding member of Elk Valley Family Society' Assisted Safe Home program Started first non-profit group daycare in Fernie Created Social Development Advisory Committee	
Social Planning Activities: Current	Safer Communities initiative Women's Centre	
Social Planning Activities: Future	Crime prevention initiatives	

Community-based Organizations and Activities (West Kootenay):

Organization Name And Primary Contacts	**Arrow & Slocan Lakes Community Services** Corky Evans, Administrator	**Castlegar & District Council** Stephen Garrett, Chair
Contact Info	Box 100, Nakusp, BC, V0G 1R0 Tel. (250) 265 3674; Fax. (250) 265 3855 Email: aslcs@columbiacable.net	C/o Castlegar & District Community Services, 1007 2nd St., Castlegar, BC Tel. (250) 365 2104; Fax. (250) 365 2154 Email. Exec_director@netidea.com
Geographic Area	Trout Lake to Edgewood, to Slocan City.	Greater Castlegar
Who Else is Involved	Internal departments RCMP Ministry of Health All unions Nakusp Service Providers Group Economic Development Board Others in need.	Brent Baker; Harry Stan Katrine Conroy; Betsy Goolioff Bev George; Brenda Jagpal; Darlene Cockerill; Giselle Rogers; Holly Jack; Jin Fenning; Kathy Oakley; Kelly Hope; Lesley Hastain; Lynnene Lewis; Pat McLachlan; Rita Gorkoff; Pat Mawhinny.
Social Planning Practises	Monthly Board meetings Monthly staff meetings Weekly team meetings Every 3 months consideration of real "options".	Monthly meetings
Social Planning Focus	Closure of community's long term care; how to generate income to replace Provincial social service funding; ferries; how to move to a primary care model; how to survive 27% countervail in woodsworker community; keep schools open; maintain young families; maintain like levels/mitigate drawdown costs; keep ASLCS solvent; how to keep seniors alive and looked after.	Sub-committees: Housing Youth Early Intervention Regional CYFC
Mandate & Goals	We have no mandate for social planning but we do it as it helps us figure out where to go, what to do, with the energy once put into applying for funding for and administering and delivering human services.	To address social issues of our region by meeting as a group to discuss what is currently affecting the residents of our area. With the large #s of stakeholders at the table we are able to find ways to share services, fill gaps in services and show a united front when dealing with government at all levels.
Social Planning Activities: Past	No history of collective social planning in the community.	
Social Planning Activities: Current	Those related to named issues and service delivery.	
Social Planning Activities: Future	Weekly and monthly meetings will continue until crises pass internally and in community.	

Organization Name And Primary Contacts	**Castlegar & District Community Services** Stephen Garrett, ED	**Blueberry Creek Community School Council** Bev George
Contact Info	1007 2nd St., Castlegar, BC Tel. (250) 365 2104 Fax. (250) 365 2154 Email: cdcss@netidea.com	200 Centre Ave., Castlegar, BC Tel. (250) 365 5103 Fax. (250) 365 6654 Email.bgeorge@sd20.bc.ca
Geographic Area	Castlegar and areas I&J	Castlegar, Genelle, Blueberry Fairview (Rossland – Slocan Valley)
Who Else is Involved	Castlegar & District Council	Community members (elected to Council)
Social Planning Practises	Monthly staff meetings Monthly Castlegar & District Council meetings / regional CYFC	Monthly meetings
Social Planning Focus	Children and youth	Prevention Early Intervention Literacy Youth and seniors
Mandate & Goals	To address identified gaps in social services within Castlegar & District.	At risk children, youth and families
Social Planning Activities: Past	Monthly planning meetings	
Social Planning Activities: Current	Monthly planning meetings.	
Social Planning Activities: Future	Monthly planning meetings.	

Organization Nam And Primary Contacts	**Nelson & District Youth Centre** Lisa Erven	**Nelson & District Seniors Coordinating Society (Community Education Services)** Carol-Joy Walker
Contact Info	608 Lake Street, Nelson, BC Tel. (250) 352 5656; Fax. (250) 352 1960 Email: ndyc@netidea.com	503 front Street, Nelson, BC, V1L 4B4 Tel. (250) 505 5384 Fax. (250) 505 9397 Email sencoord@netidea.com
Geographic Area	Nelson and area (including Salmo, Slocan Valley, Winlaw, Kaslo).	Nelson and area
Who Else is Involved	Internal departments City of Nelson Nelson City Police Other youth service providers (as needed)	Internal: Community Education Services; Seniors one Stop. Nelson Inter-agency Employment and Education Committee
Social Planning Practises	Bi-weekly staff meetings	Internal planning is ongoing. 8-10 meetings / year with inter-agency group.
Social Planning Focus	Youth crime prevention initiatives; youth employment and skills development; public awareness of youth safety, social issues and ageism.	Inter-generational programs and activities Health Faire Contact line and visiting Help with transportation and shopping.
Mandate & Goals	To support and develop youth focused initiatives within the community.	To provide an organized approach toward creating a society that will: 1. Enhance the well-being of seniors / older residents in Nelson; 2. Gather and disseminate information relevant to seniors / older residents 3. Identify to the appropriate authority gaps in service 4. Establish stable and continuing funding for programs.
Social Planning Activities: Past	Youth and community surveys Planning meetings for all past youth initiatives Initial steering committee to establish centre.	
Social Planning Activities: Current	Staff meetings Informal youth meetings	Needs assessments, community development projects, volunteer training, project management, strategic planning, intergenerational programs and employment counselling project.
Social Planning Activities: Future	Development of a Youth Centre Advisory committee (appointed by Council). 3-5 Year vision planning process	

Organization Nar And Primary Contacts	**Salmo Community Services** Andrew Jarrett, ED	**Slocan Valley Seniors Housing Society** Donna Ratcliffe
Contact Info	Box 39, Salmo, BC, V0G 1Z0 Tel. (250) 357 2277 Fax. (250) 357 2385 Email. salmocs@netidea.com	Box 69, Slocan Park, BC, V0G 2E0 Tel. (250) 226 7136; Fax. (250) 226 71370 Email: svseniorshousing@netidea.com
Geographic Area	Salmo and area	Slocan City to Playmore Junction
Who Else is Involved	Staff team Members of Salmo Interdisciplinary team (***currently inactive***) Salmo Resiliency Committee	Board and Committee members Staff
Social Planning Practises	Weekly staff meetings (includes occasional social planning discussions) Interdisciplinary group met monthly (discussions often included social planning themes)	Monthly meetings
Social Planning Focus	Interdisciplinary group: coordination of social services, identification of service gaps, sponsoring of social service projects. Resiliency group: economic development.	To assess and respond to housing needs and issues for seniors in the valley
Mandate & Goals	Interdisciplinary group: no specific mandate – forum for sharing information and coordinating efforts. Resiliency Group: to develop an economic development plan.	To provide and maintain geared-to-income and residential accommodation and/or related services in the Slocan Valley in order to assist and support seniors in need. To help obtain or provide related services including, outreach support services and activities to valley seniors to help them maintain their independent living and residency closer to family and friends.
Social Planning Activities: Past		Merging of valley groups in 1995 to address housing and support issues and determine needs of valley seniors Completion of 10 units of seniors housing in 1999.
Social Planning Activities: Current		Review and planning for better supports and activities fro seniors One year project (to may 2003) for strategic plan to determine ways to better assist seniors to remain independent in the valley. Review of issues for supportive and assisted living housing for seniors Ongoing liaison with community groups, businesses and individuals to be more effective in supporting seniors and their families.
Social Planning Activities: Future		See above – ongoing activities.

Organization Name And Primary Contacts	**Trail Family & Individual Resource Centre Society** Gail Lavery, ED	**Trail Child Youth & Family Committee** Gail Lavery, Chair
Contact Info	Box 153, Trail, BC, V1R 4L5 Tel. (250) 364 2326; Fax. (250) 364 1255 Email: gaill@netidea.com	c/o FAIR, Box 153, Trail, BC, V1R 4L5 Tel. (250) 364 2326 Fax. (250) 364 1255 Email. gaill@netidea.com
Geographic Area	Greater Trail (most programs) Greater Trail & Castlegar (CCRR) West Kootenay/Boundary (crisis line)	Greater Trail
Who Else is Involved	Staff Early Intervention Team Community Relations Committee Family Literacy Steering Committee	Minutes to 30 organizations/individuals. Key players: FAIR West Kootenay Boundary Addictions Trail Childcare Society Trail Assc. For Community Living Public Health Nurses ANKORs MCFD City of Trail rep. Trail Alternate School Salvation Army Mercy Response Line Church youth pastors
Social Planning Practises	Ad-hoc and in context of service delivery planning.	Monthly for 1.5 hours
Social Planning Focus	Early Intervention: cross-program planning and sharing of resources. Community Relations: fundraising activities, community presentations, planning for use of funds.	Services to children, youth and families.
Mandate & Goals		
Social Planning Activities: Past		Identification of services and service gaps.
Social Planning Activities: Current		Save our Services: planning and presentations to MLA and Minister Gordon Hogg to advocate for all govt funded services in Trail and to present a united front.
Social Planning Activities: Future		Response to dramatic cuts to youth services.

Organization Name And Primary Contac	**Greater Trail Community Skills Centre** Janet Morton, ED Kelvin Saldern, Training Consultant	**Crawford Bay School** Dave Kerr, Principal
Contact Info	Suite 123 – 1290 Esplanade, Trail, BC, V1R 4T2 Tel. (250) 368 6360 Fax. (250) 368 6370	Box 100, Crawford Bay, BC, V0B 1E0 Tel. (250) 227 9218 Fax. (250) 227 9525 Email. dkerr@sd8.bc.ca
Geographic Area	Greater Trail (sometimes West Kootenays)	Riondel, Crawford Bay, Grey Creek, Boswell
Who Else is Involved	11 employees	Staff Student Council Parent Advisory Council
Social Planning Practises	Constant projects that need collaboration, needs assessment and planning. Staff are in some kind of planning meeting several times/week. Local governments, Selkirk College, SD#20, RDKB, CFDC, Kootenay Assc. For Science & Technology, Chambers of Commerce, FAIR.	4/5 times per year among staff, students and parents.
Social Planning Focus	Training and education Employment Services	Meeting the needs of East Shore youth.
Mandate & Goals	To increase employability and enhance the sustainability of organizations and communities by identifying and responding to learning, skill development and employment needs.	
Social Planning Activities: Past	A range of training and employment needs and projection studies. Participation in various planning committees, incl. Selkirk College Continuing Education Dept, Multimedia Program Advisory Committee, Chamber of Commerce Tourism Development Study, Youth Advisory Committee.	Student Breakfast Club
Social Planning Activities: Current	Development of initiatives to meet skills gap Partner in proposed 3 year e-learning project Youth training and employment initiatives Continued needs assessment, planning and project implementation related to training and Employment solutions.	CBT Youth initiatives grant.
Social Planning Activities: Future	Continued needs assessment, planning and project implementation related to training and employment solutions. Ongoing activities to serve the needs of our community, with particular attention to the disenfranchised.	

Community-based Organizations and Activities (North):

Organization Nam And Primary Contacts	**Community Connections** Gayle Morgan, ED	**Revelstoke Economic Development Commission** Alan Mason
Contact Info	Box 2880, Revelstoke, BC, V0E 2S0 Tel. (250) 837 2920; Fax. (250) 837 2920	C/o Revelstoke Chamber of Commerce Box 490, Revelstoke, BC, V0E 2S0 Tel. (250) 837 5345 Fax. (250) 837 4223 Email redc@revelstoke.net
Geographic Area	City of **Revelstoke** & Columbia Shuswap Electoral Region "B"	Revelstoke
Who Else is Involved	All internal program staff Inter-agency planning w/: Career Centre Economic Development Enterprise Centre Child Care Society Skills Centre	Community Connections City of Revelstoke
Social Planning Practises	Semi-annual internal planning meetings; monthly management meetings; Annual review of Social/Economic Plan for Community (developed in 2000).	As needed.
Social Planning Focus	Service delivery; identification of current and future social issues; Inter-program and inter-agency cooperation	To integrate social planning into the community planning process.
Mandate & Goals	To strengthen and enrich the lives of individuals and families in our community by providing accessible, responsive services. Responding to community and individual need. Provision of centralized location for social programming and social planning.	
Social Planning Activities: Past	Revelstoke and Area Community Development Plan: 5 year Social / Economic Plan (2000) Youth Resources Feasibility Study (2000)	Mid-80's planning processes (with traditional economic focus) CFDC took on certain issues (e.g. lack of child care services) Last community planning process (2000-01) the need for social planning was clearly identified, with organizational capacity as a key issue….Community Connections formed.
Social Planning Activities: Current	Internal review of current program delivery; start of long term planning to maintain and expand social programming. Identification of indicators for assessing and evaluating community changes. Continue to develop accessible way for community input. Pursue funding/ training to incorporate planning into ongoing organization activities.	See Community Connections
Social Planning Activities: Future	Unsure: largely dependent on funds and organizational focus.	See Community Connections

Organization Name And Primary Contact	**Golden Family Centre** Terry Mobberley, ED Rhonda Smith, IDP Consultant
Contact Info	Box 415, Golden, BC, V0A 1H0 Tel. (250) 344 2000; Fax. (250) 344 5225 Email: rsmith@rockies.net
Geographic Area	Golden and area
Who Else is Involved	Internal departments
Social Planning Practises	Monthly meetings of Golden FACIT Team (feeding into Regional FACIT).
Social Planning Focus	
Mandate & Goals	
Social Planning Activities: Past	
Social Planning Activities: Current	
Social Planning Activities: Future	

Local Government:

Organization Name And Primary Contacts	**City of Rossland** Mark Martin	**City of Nelson** Trish Dehnel, City Planner
Contact Info	Box 1179, Rossland, BC, V0G 1Y0 Tel. (250) 362 7396; Fax. (250) 362 5451 Email: markmartin@rossland.com	502 Vernon Street, Nelson, BC, V1L 4E8 Tel. (250) 352 5511 Fax. (250) 352 2131 Email trish@city.nelson.bc.ca
Geographic Area	City boundary	City boundary
Who Else is Involved	Municipal Council Rossland Chamber of Commerce Community groups	Nelson City Library Nelson & District Youth Centre Seniors Committee City Council (support of health care, Family Place, recreation facilities)
Social Planning Practises	Informal weekly meetings Formal meetings as needed.	Monthly meetings of Nelson Youth Committee and Nelson Library Board
Social Planning Focus	Official Community Plan Economic Development	Library Youth Seniors OCP (1993) Policies: #2: Affordable housing #9: Community facilities #10: Parks and recreation #18: Small scale institutional
Mandate & Goals	The people of Rossland will work together, with their elected Council, to keep our community safe, clean, attractive, healthy and socially, physically and economically sustainable. Some goals: To build Rossland's sense of community by providing opportunities for people of all ages, incomes, cultures and interest; To continue to provide diverse recreational opportunities; To preserve Ross land's history and heritage; To provide a wide range of educational opportunities To maintain and enhance a safe, clean and healthy community; To encourage participation by all citizens.	
Social Planning Activities: Past	7 month work to produce Strategic Plan (April 2002) Work of Watershed Management Plan	Nelson Housing Committee
Social Planning Activities: Current	OCP Review	Library Youth Centre
Social Planning Activities: Future	Implement the strategic plan	

Organization Name And Primary Contacts	**Village of Montrose** Andre Carrel, Administrator	**City of Cranbrook** Roy Hales, Development Officer
Contact Info	PO Box 510, Montrose, BC, V0G 1P0 Tel. (250) 367 7234 Fax. (250) 367 7288 Email Montrose@netidea.com	40-10th Avenue S., Cranbrook, BC, V1C 2M8 Tel. (250) 489 0205 Fax. (250) 426 7264 Email hales@city.cranbrook.bc.ca
Geographic Area	Village boundary	City boundary
Who Else is Involved	Council members Open invitation to residents of Montrose of participate in strategic planning workshops	City of Cranbrook departments: Corporate Services Engineering and Planning Leisure Services
Social Planning Practises	Annual strategic planning meetings (broad mandate).	No formalized social planning function. Communication on social issues are generally received by the City and considered on an ad hoc basis. City Council may consider such matters as part of its regular Council meeting agenda.
Social Planning Focus	Education services, recreation, services for seniors.	OCP: Need to develop an affordable and special needs housing policy Desire to maintain and enhance City's role as regional service centre including consolidating Cranbrook's role as a location for related institutional uses / development and services (e.g. hospital services, SD administration, College of the Rockies post-secondary education, Provincial departments) Childcare Parks and recreation leisure services.
Mandate & Goals	Community cohesiveness, family orientation.	AS identified above, based on OCP.
Social Planning Activities: Past	Social policies included in OCP (education, recreation, transit) Establishment of a Comprehensive Community Education and Resource Centre Society.	Undertaken on ad hoc basis.
Social Planning Activities: Current		As above
Social Planning Activities: Future		As above

Organization Name And Primary Contac	**City of Kimberley** Larry Heber, Economic Development Officer	**Regional District of East Kootenay** Bob Whetham, Manager, Planning & Development Services
Contact Info	340 Spokane Street, Kimberley, BC, V1A 2E8 Tel. (250) 427 5311 Fax. (250) 427 5252 Email info@city.kimberley.bc.ca	19 – 24th Ave. S., Cranbrook, BC, V1C 3H8 Tel. (250) 489 2791 Fax. (250) 489 1287 Email bwhetham@rdek.bc.ca
Geographic Area	Kimberley	SE BC, approx. 28,000 sq km
Who Else is Involved		
Social Planning Practises	No specific social planning function. Used to have a Sustainable Development Committee (now defunct) which had a social component.	Monthly meeting of Planning and Building Committee. No specific social planning function.
Social Planning Focus		
Mandate & Goals	Community cohesiveness, family orientation.	To provide a better life for the people and community (using a Community Economic Development approach).
Social Planning Activities: Past	Social policies included in OCP (education, recreation, transit) Establishment of a Comprehensive Community Education and Resource Centre Society.	1990's – Strong Communities (different economic development projects) Sullivan Mines Interpretive Centre (includes social history / community change)
Social Planning Activities: Current		
Social Planning Activities: Future		Sullivan Mines Interpretive Centre planning larger displays (pending funds).

Organization Name And Primary Contacts	**Village of Valemount** Judy Bosh, Administrator
Contact Info	Box 168, Valemount, BC, V0E 2Z0 Tel. (250) 566 4435 Fax. (250) 566 4249 Email villvale@valemount.com
Geographic Area	Robson Valley
Who Else is Involved	Valemount Learning Centre (employment / training) RCMP Robson Valley Home Support MCFD Economic Development Community Futures
Social Planning Practises	Semi-annual inter-agency meetings
Social Planning Focus	Training and employment
Mandate & Goals	
Social Planning Activities: Past	Industrial Adjustment Service Program – training of locals to ensure their readiness for future potential jobs.
Social Planning Activities: Current	Assistance to employees / families re. the pending mill closure.
Social Planning Activities: Future	Ongoing training re. potential development in the valley, i.e. tourism, destination resort operations.

Commonly Noted Resources:

- SPARC (particularly printed materials); e.g. *A Citizen's Guide to Community Social Planning.*
- Flo Frank & Anne Smith, *Getting People Ready, Willing and Able to Revitalize their Community.*
- SPARC's Community Development Institute
- Innovation Assessment – Community Futures
- Population Health – Health Canada Toolkit
- Census data
- Canadian Rural Partnership Dialogue
- HRDC's Social Policy Digest
- United Community Services Co-op (provincial cooperative of non-profits, with focus on cost-savings through bulk purchases of services.)
- First-hand information from social service agencies
- *Children First! Child Health Report*, Kootenay Boundary Health Region (August 1998).
- Prevention Source BC
- Red Cross documents
- Canadian Community Economic Development initiatives and conferences
- Social Investment Organization
- Kootenay Boundary Seniors Housing Network
- BC non-Profit Housing Association
- BC Association of Child Care Services
- Federation of Children & Families of BC
- Community Social Services Employers' Association.
- Conference Board of Canada
- Industry Canada
- HRDC
- McCreary Centre Society reports
- Public Health Statistics
- Planned Parenthood Association of BC
- Western Diversification
- Web sites, email
- Canadian Association of Family Resource Programs
- ASPECT (association of Community-Based Training)

Comments from Survey Participants:

- Would like to see more resources available and funds to support strategic planning initiatives;
- Such people (social planning contacts) are everywhere. I probably know a hundred people who would answer the description, 6 of whom might actually do stuff;
- Columbia Basin should hold a Community Development Institute (such as SPARC's) every year, with communities taking it in turn to host;
- Would like to see a regional planning body that invites representation from non-profit groups of. Should include small business, schools, college and other educational, training personnel, municipalities, non-profits, health authorities, arts and service organizations;
- We need to establish common goals and work together in these times of economic and political distress;
- Local issues we are facing include the retention of health care services and the lack of seniors housing;
- No one is doing social planning in the Basin and it is badly needed;
- CBT could do much to support the establishment of social planning groups Basin-wide;
- Need for significant education so that "rampant bigotry" did not destroy the dreams before they begin;
- Need to address competition and capitalism;
- Inclusion needs to be real and to the "lowest common denominator";
- Learn from existing experts, those in the trenches;
- Focus needs to be on understanding the root causes of poverty, violence, discrimination etc so that any planning is based in reality not academic expertise or charity or exclusivity;
- Needs significant creativity to lend a voice to the traditionally ignored and discounted.

Other Notes:

SPARC is currently developing a Social Planning Network of BC (latest draft discussion paper released in July 2002); plans are afoot to develop a governance model and strategic plan. Current mandate is so that community social planning organizations can work together to:

- ☐ Share resources and information to support our ability to meet our goals within our communities;
- ☐ Promote understanding of community social planning among decision-makers and the general public;
- ☐ Encourage research of issues that are of interest to organizations involved in community development and social planning.
- ☐ More information is available from (604) 736 8118.

Ad hoc social planning groups are not uncommon – current examples are a *Health Matters sub-committee of the Regional District of Central Kootenay* and a community-based (Nelson) *Save our Services committee* aimed at providing a regional voice on health issues and addressing the recent government cuts to health services.

A new *Interior Regional Planning Committee* is being formed by the *Ministry of Children & Family Development* to assist the Ministry in accomplishing its mission to promote and develop the capacity of families and communities to care for and protect vulnerable children and youth. The Committee will pay particular attention to service delivery models consistent with the Ministry's recent strategic shifts. More information is available from Tanya Martin, Interior Region Executive Assistant for MCFD, Tel (250) 371 3994.

Appendix II

Community Planning Symposium
May 10-11, 2004

North Star Centre
(Top of Gerry Sorenson Way)
Kimberley, BC

COLUMBIA BASIN TRUST

Columbia Basin Trust Invites you or a delegate from your organization to attend the Community Planning Symposium

Targeted Delegates

For more information, please call Merilla Thorp, Columbia Basin Trust, at 1 800 505 8998 or 1 250 265 9936, or mthorp@cbt.org.

Conference Agenda

Monday May 10, 2004

11:30 p.m.	**Registration**
12:30 p.m.	**Welcome, Chief Sophie Pierre,** St. Mary's Band
12:45 p.m.	**Opening Remarks:** **Cathy Girling,** Chair of Columbia Basin Trust's, Social Sector Steering Committee
1:00 p.m.	**Opening Keynote Address: "Mr Happy? What does make a good life?"** **Dr. Alex Michalos,** Prof Emeritus, UNBC, Chair, Community Planning Council of Prince George
2:00 p.m.	**Plenary Presentation: "What is Social Planning and what can it do for us?"** **Flo Frank,** Managing Partner, Common Ground Consulting Inc
2:30 p.m.	**"Integrating economic and social action to generate better conditions for communities across Canada".** **Rupert Downing,** Executive Director, Canadian CED Network
3:00 p.m.	**Break**
3:15 p.m.	**Plenary Panel Discussion: "Been there, done that: Models of Social Planning"** Set discussion items to be included in this panel discussion include a brief look at the overall structure and set-up of their respective models, best practices, lessons learned **Dr. Alex Michalos,** Community Planning Council of Prince George Independent and partially funded from municipal government **Sandra Goth**, Executive Director, Cowichan Family Life (Cowichan Social Planning Visioning Committee) Emerging hybrid model, encompassing multiple municipalities and rural areas **Gwen Phillips,** Governance Transition Coordinator, Ktunaxa Nation First Nation's Model **Ron McColl,** Manager Recreation and Culture Department City of Kamloops Interior Municipal Model
6:00 p.m.	**Dinner**
7-8:00 p.m.	**Dessert Presentation:** Social Comedienne **Dr. Marylee Stephenson,** Founder and President of CS/RESORS Consulting Limited, an established social policy research and program evaluation company

Community Planning Symposium
May 10-11, 2004
North Star Centre (Top of Cerry
Generation Way)
Kimberley, BC

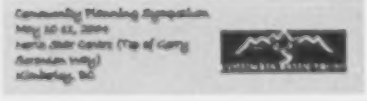
Conference Agenda

Tuesday May 11, 2004

7:45 a.m.	**Coffee and muffins available**
8:15 a.m.	**Keynote Address and Plenary Workshop** **"Population Health, Changing Communities and Quality of Life"** **Dr. Ronald Labonte**, Director, SPHERU - Saskatchewan Population Health and Education Research Unit; Professor, Community Health and Epidemiology, University of Saskatchewan; and Professor, Faculty of Kinesiology and Health Studies, University of Regina
9:45 a.m.	**Break**
10:10 a.m.	**Plenary Presentation: "Social Planning Models in Rural Australia"** **Professor Daniela Stehlik**, Director, Alcoa Research Centre for Stronger Communities, Curtin University of Technology, Perth, Australia **Dr. Lesley Chenoweth**, Senior Lecturer, Director BSocWk program, Director of Internationalization, School of Social Work and Applied Human Sciences, The University of Queensland, Brisbane, Australia
12:00 p.m.	**Lunch**
1:00 p.m.	**Breakout Brainstorm Session: "Your ideas for Social Planning in the Region"** ▶ What Social Planning activities would you like to see (local/Basin-wide)? ▶ Key objectives to be tackled with social planning? ▶ What model/structure would you ideally envision (Basin-wide, sub regional etc.)?
1:30 p.m.	**Facilitated plenary discussion:** **"Pulling the threads together: Desired scenarios of Social Planning"** **Flo Frank** Objective: Report on feedback from morning break-out session A Chance for *"Is this what you said?"*, and invite other comments
2:00 p.m.	**Break**
2:15 p.m.	**Plenary Panel Discussion:** **"What Local Indicators Are Being Gathered? Challenges and Recommendations"** **Steve Litke**, Fraser Basin Council, Moderator **Dr. Ron Dovell**, Health Planning Researcher, Interior Health Authority **Mike Stolte**, CED Manager, Central Kootenay Community Futures; Business indicators and the Business Vitality Index **Dr. Rachel Holt**, Vendian Consulting; Environmental Indicators in the Basin **Dr. Ronald Labonte**, Director SPHERU, University of Saskatchewan and University of Regina

Conference Agenda

3:15 p.m.	**Breakout Brainstorm Session** **"What indicators would you most like to see monitored to help ensure quality of life?"** Possible categories ▶ Health ▶ Social/Community ▶ Economic & Business ▶ Environment Objective: Identify key indicators that should be monitored, who could collect them and what role they should play within a social planning strategy
3:45 p.m.	**Facilitated plenary discussion:** **"Pulling the threads together: Indicators that could play a role in social planning."** Objective: Report on feedback from previous afternoon's breakout session **A Chance for:** *"Is this what you said?"* **and invite other comments.** **Flo Frank**
4:00 p.m.	**Facilitated Plenary Discussion** **"How is it shaping up and where do we want to go?"** **Flo Frank** Objective: Provide summary of what key points have been discussed around social planning objectives and activities, what the model(s) could look like, and what kind of partners could be involved. Determine how the delegates feel about the session, the level of commitment to move on, and what the next steps should be
5:00 p.m.	**Closing Remarks: Don Johnston, Chief Executive Officer, Columbia Basin Trust**
6:00 p.m.	**Dinner** Free evening



Appendix III: Presentations

Ron Dovell – Local Indicators, Interior Health Authority

Sandra Goth – Social Planning Cowichan

Rachel Holt – State of the Environment

Ron Labonte – Saskatchewan Population Health

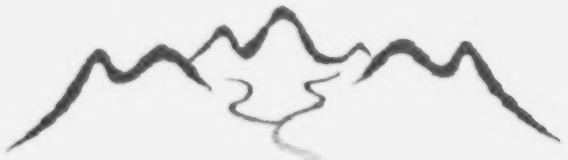
Daniela Stehlik and Lesley Chenoweth – Social Planning Models in Rural Australia

Mike Stolte – Business Vitality Index

(Creating?) Meaningful Evidence

Local Indicators: challenges and recommendations

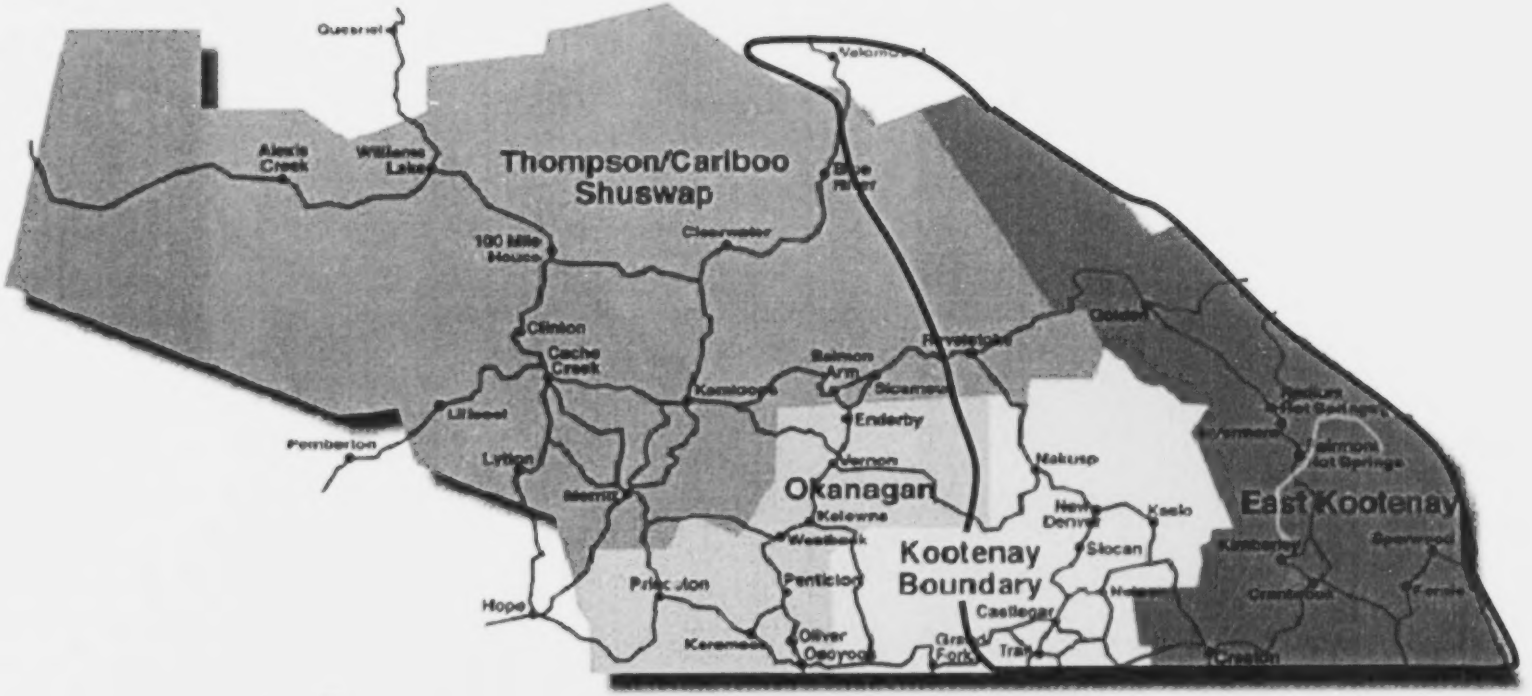
Dr. Ronald A Dovell



COLUMBIA BASIN TRUST

Interior Health

Geo-Political Boundaries

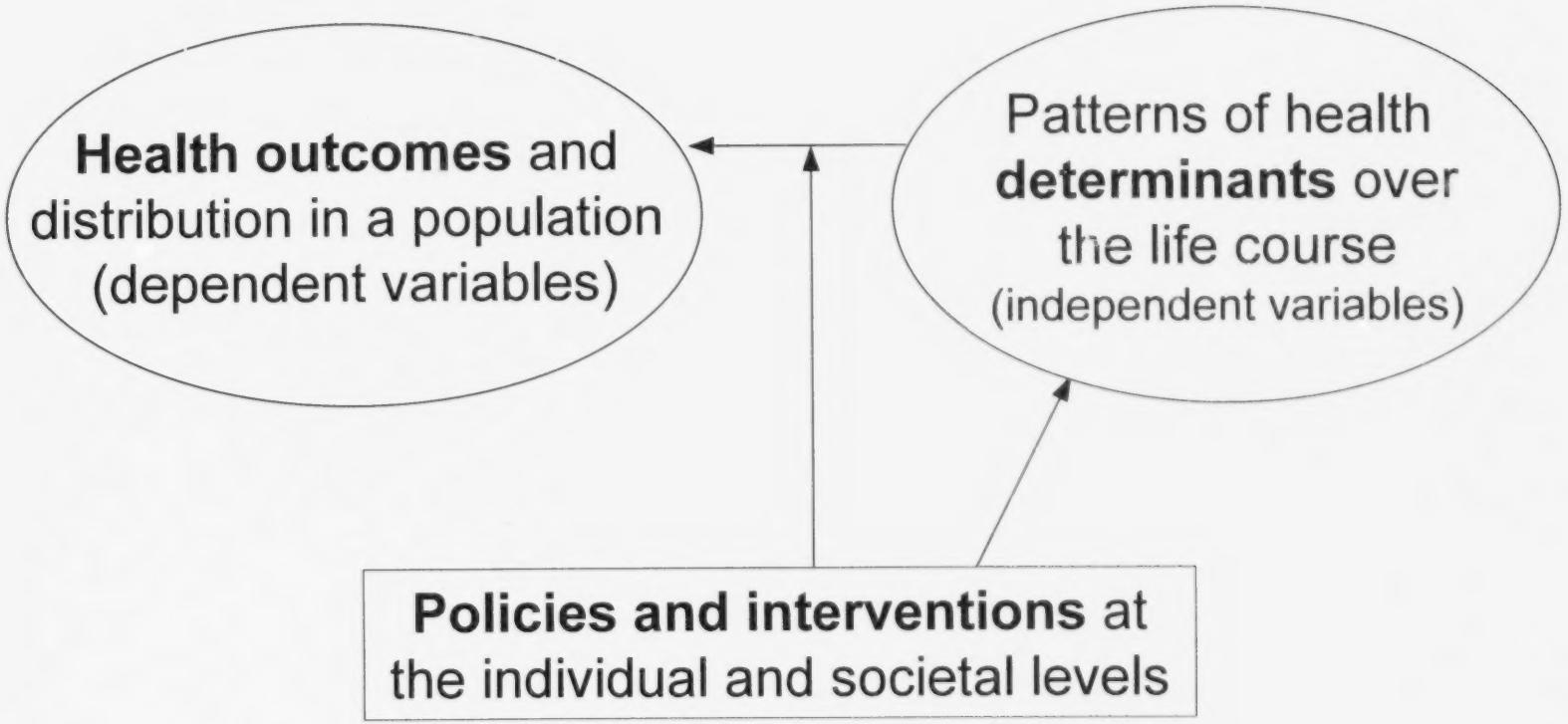


COLUMBIA BASIN TRUST

Geo-Political Boundaries

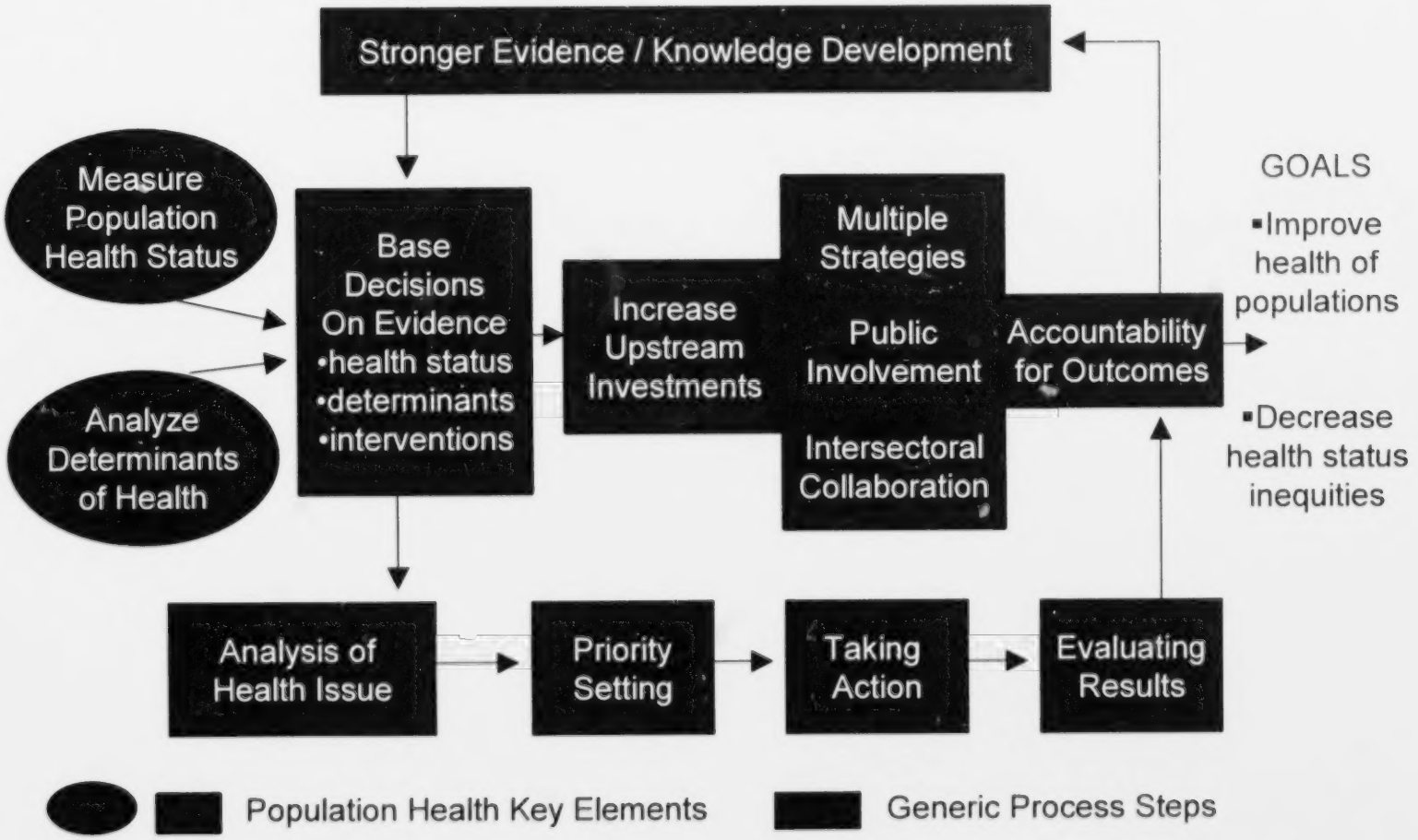
COLUMBIA BASIN TRUST

Population Health Model


Health outcomes and distribution in a population (dependent variables)
Patterns of health **determinants** over the life course (independent variables)
Policies and interventions at the individual and societal levels

Adpated from: Kindig and Stoddart, AJPH, 2003

Key Elements



Population Health Profile 2004

A picture of health:
Interior Health region

Contents

- demographics
- causes of death
- illness and injury
- determinants of health
- provincial health goals

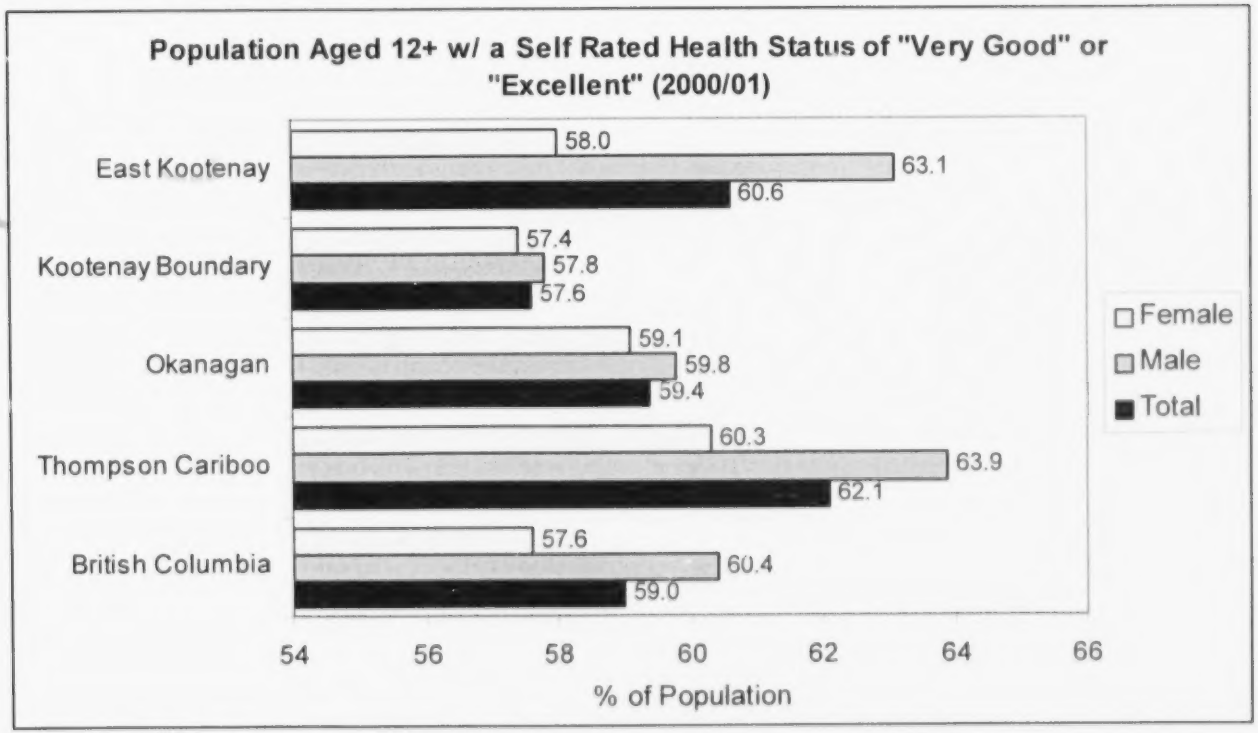
Population Health Evidence Base

Interior Health

available at:
www.interiorhealth.ca

A Fool's Paradise ?

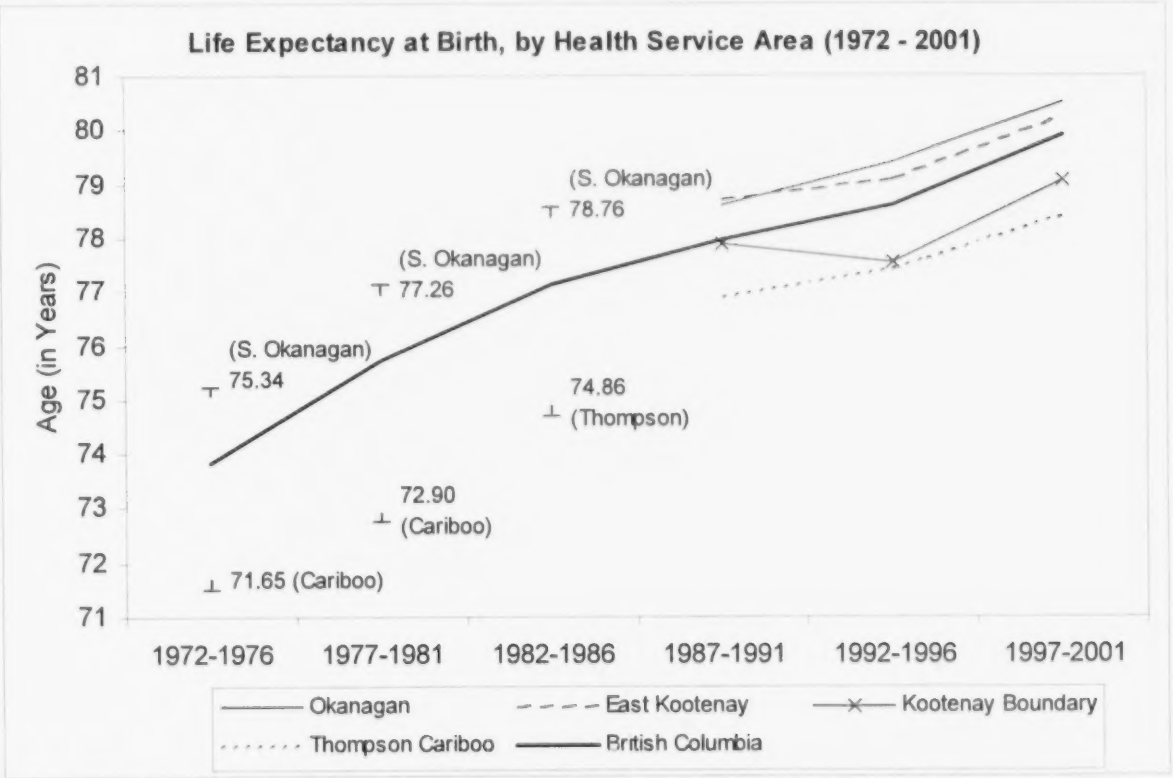
Figure 1. Self-Rated Health Status



Source: Statistics Canada, Canadian Community Health Survey, 2000/01.

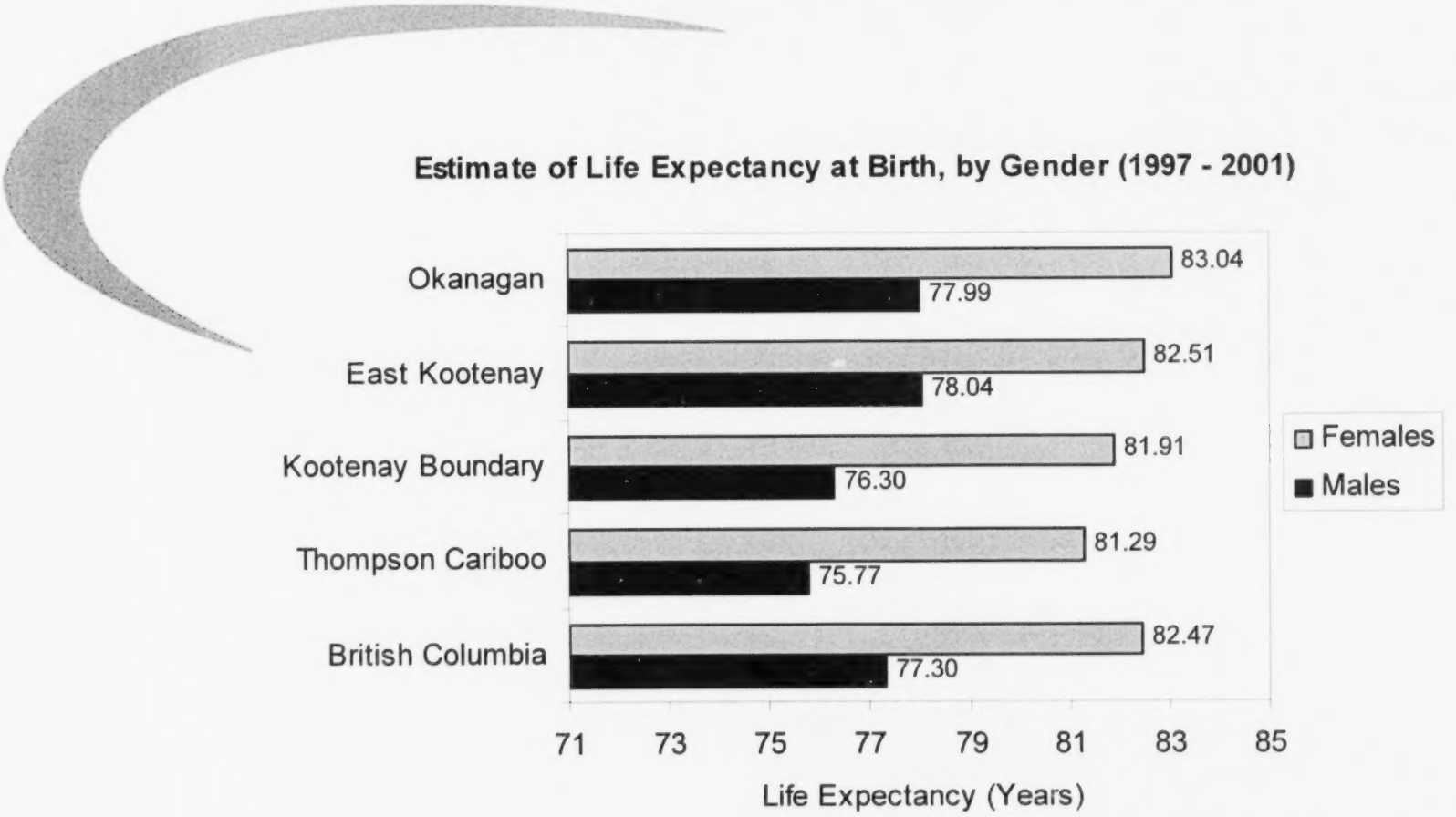
A Fool's Paradise ?

Figure 1. Life Expectancy at Birth, by Health Service Area

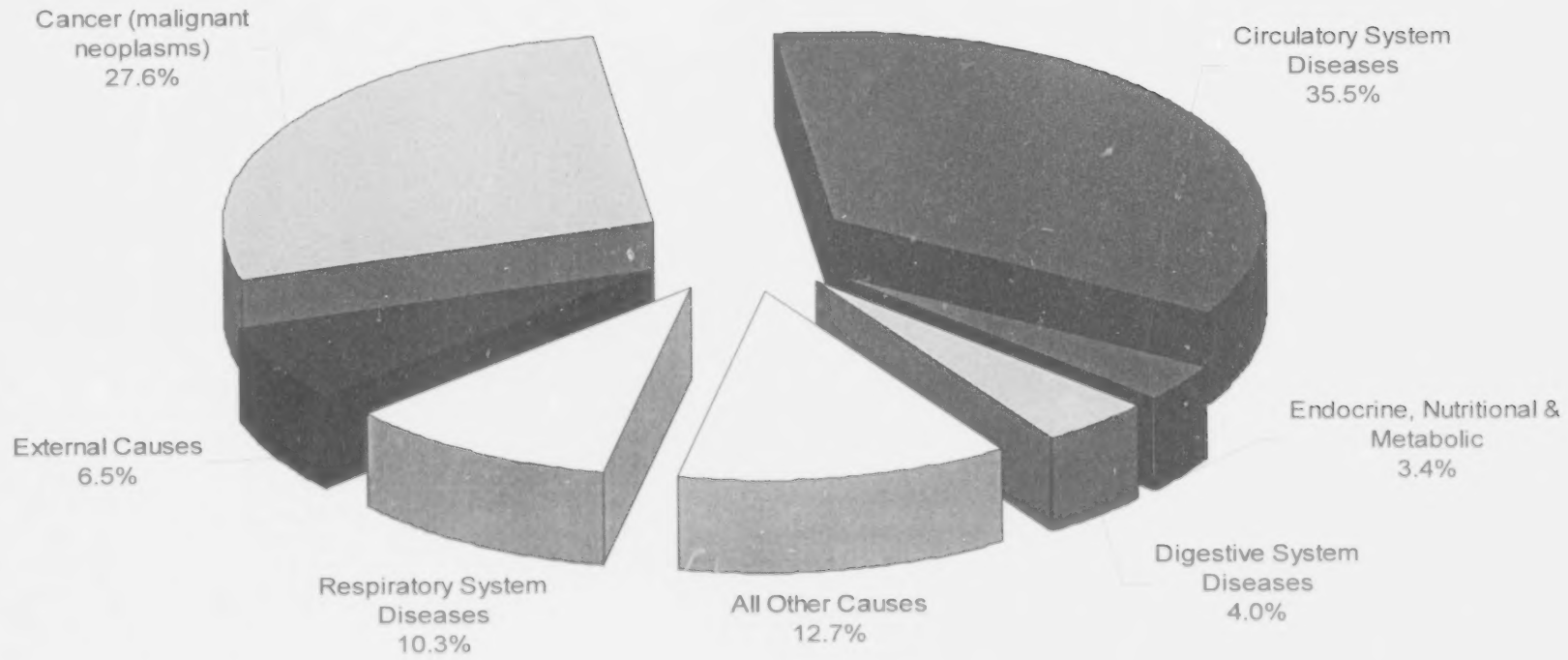


Note: Data for the first three periods represent the former health regions, while the latter three periods represent the new Health Service Areas of Interior Health.

A Fool's Paradise ?



Deaths, 1998-2002


Cancer (malignant neoplasms) 27.6%
Circulatory System Diseases 35.5%
External Causes 6.5%
Endocrine, Nutritional & Metabolic 3.4%
Respiratory System Diseases 10.3%
All Other Causes 12.7%
Digestive System Diseases 4.0%

Population Health Profile 2004

A picture of health:
Interior Health region

Population Health Evidence Base

Interior Health

Health Goals For British Columbia

Goal 3

A diverse and sustainable physical environment with clean, healthy and safe air, water and land.

available at:
www.interiorhealth.ca

Environmental Health

Goal 3: Physical Environment	
Air	• PM10 air pollution • Exposure to second-hand smoke
Water	• Water quality index • Boil-water advisories
Food	• Critical hazards in food premises • Food samples meeting guidelines
Land and Soil	• Blood lead levels in children
Sustainability	• Greenhouse gas emissions • Energy consumption • Land in protected areas

Health Status Vignette, 2004

Contents

- population projections
- health trends
- health services

A Snapshot of Health:
East Kootenay
Health Service Area

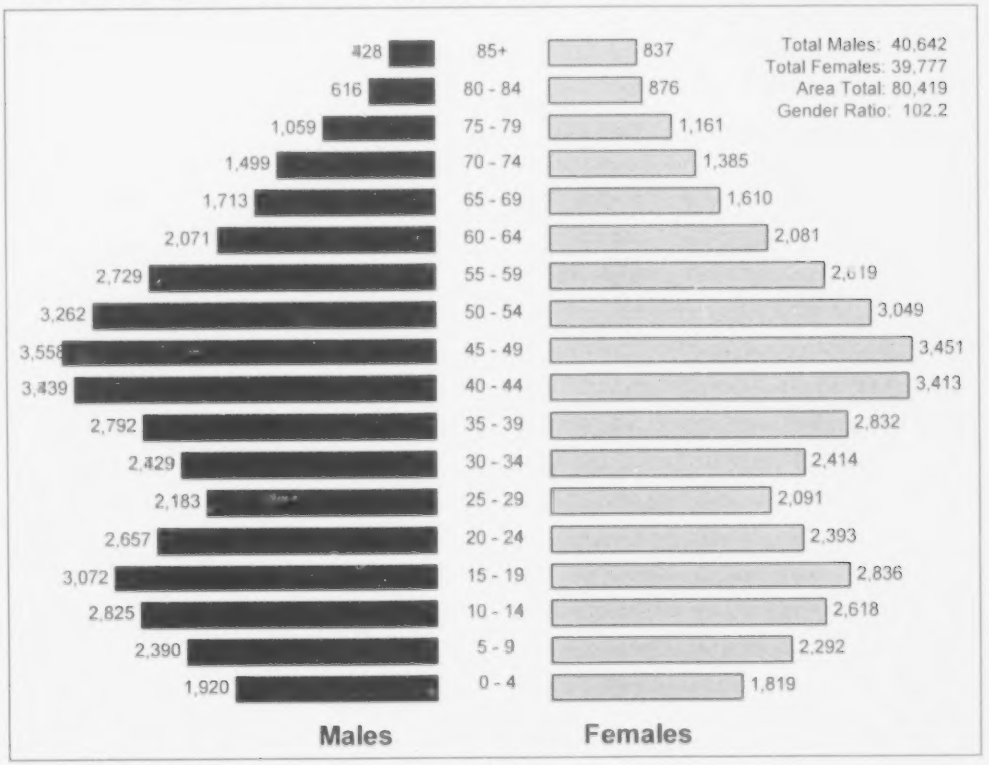
(also see local health areas
Kimberley, Arrow Lakes etc.)

Population Health Evidence Base

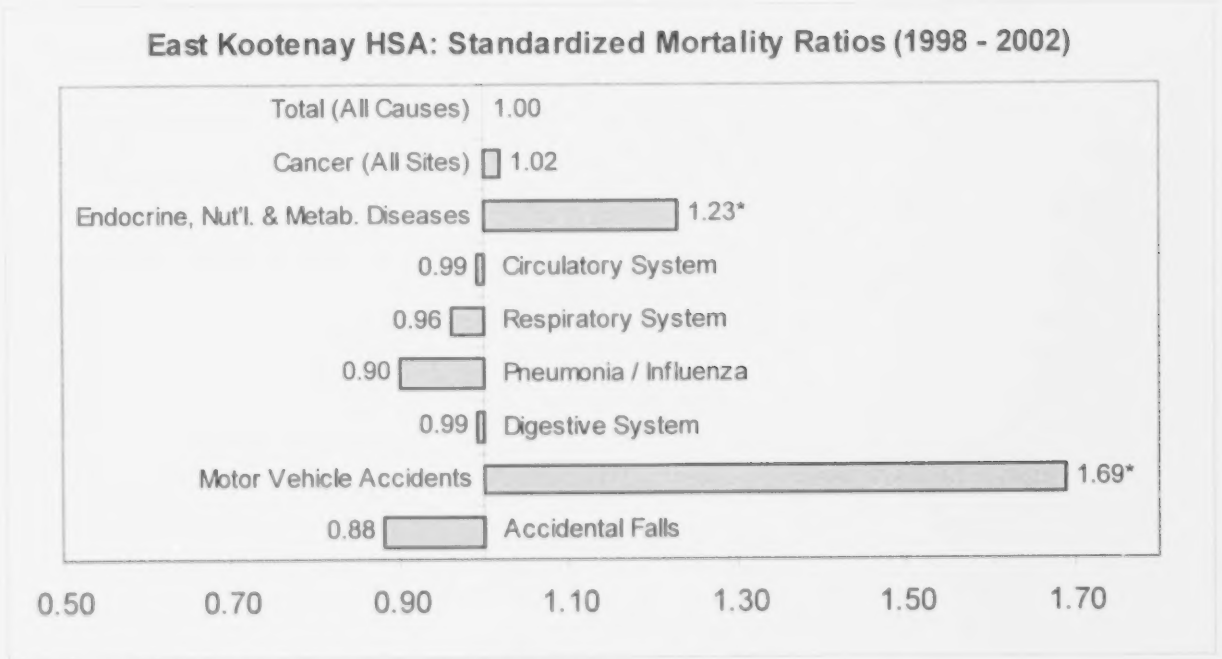
Interior Health

available at:
www.interiorhealth.ca

Population Pyramid



Mortality Ratios

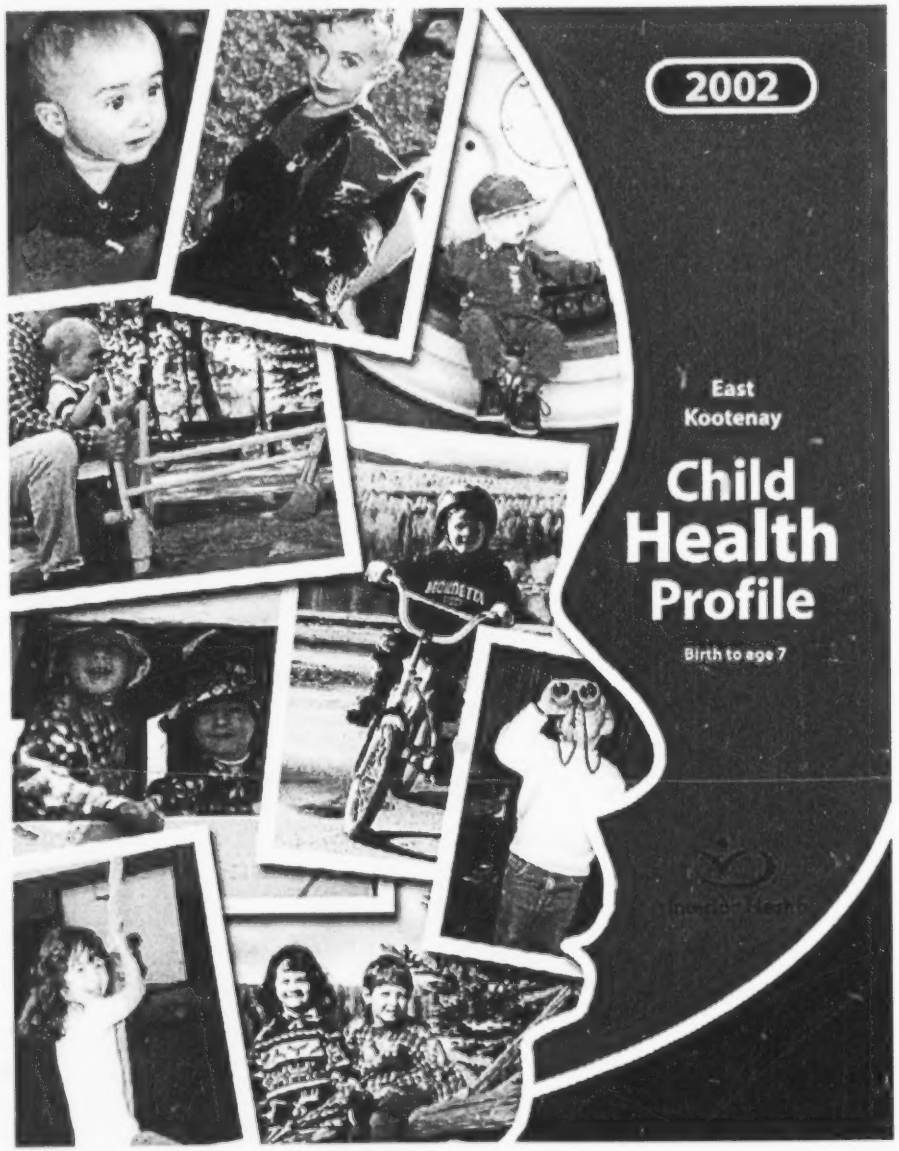


(* denotes statistically significant, compared with B.C.)

Risk factors for Diabetes and Motor Vehicle Collisions?

East Kootenay Trends

- Causes of death ⬇
- Lung Cancer ⬆
- Alcohol-related deaths ⬆



COLUMBIA BASIN TRUST

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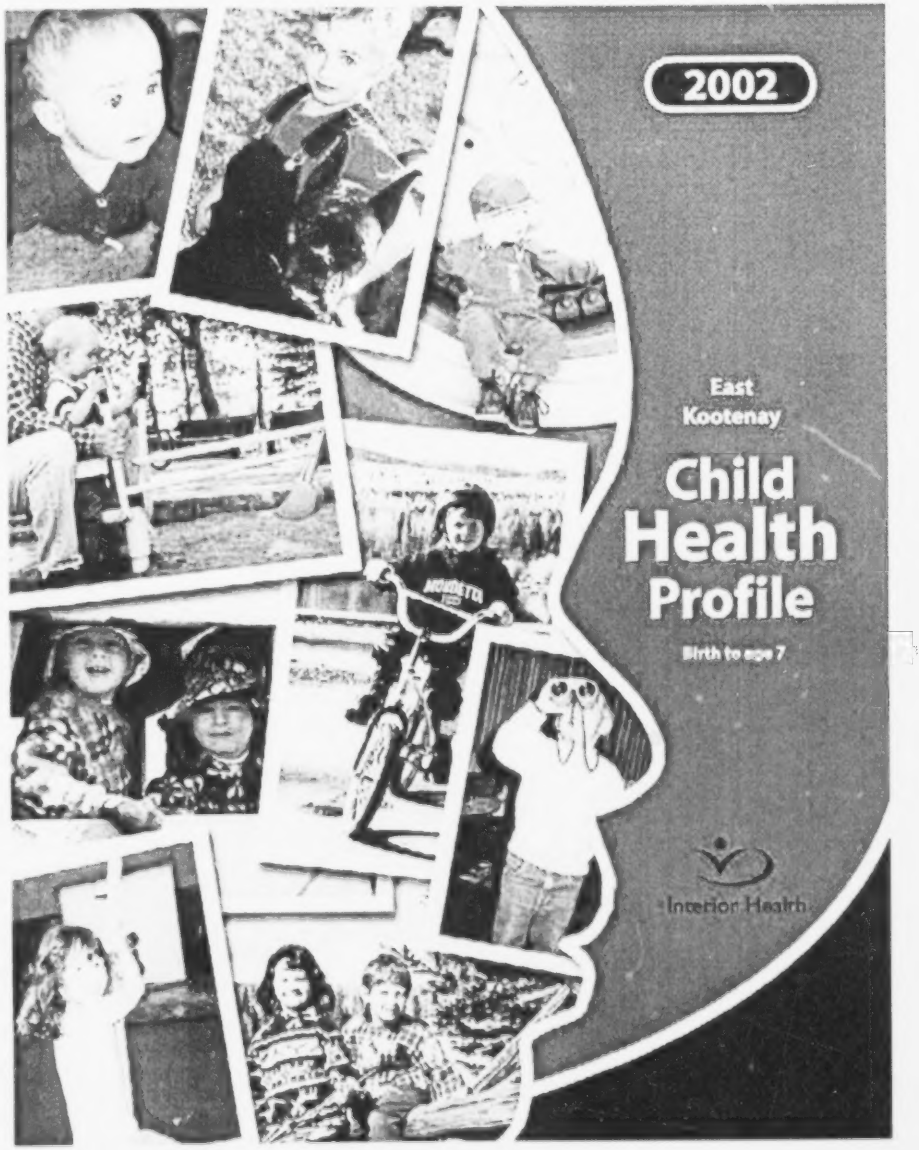
www.interiorhealth.ca



COLUMBIA BASIN TRUST

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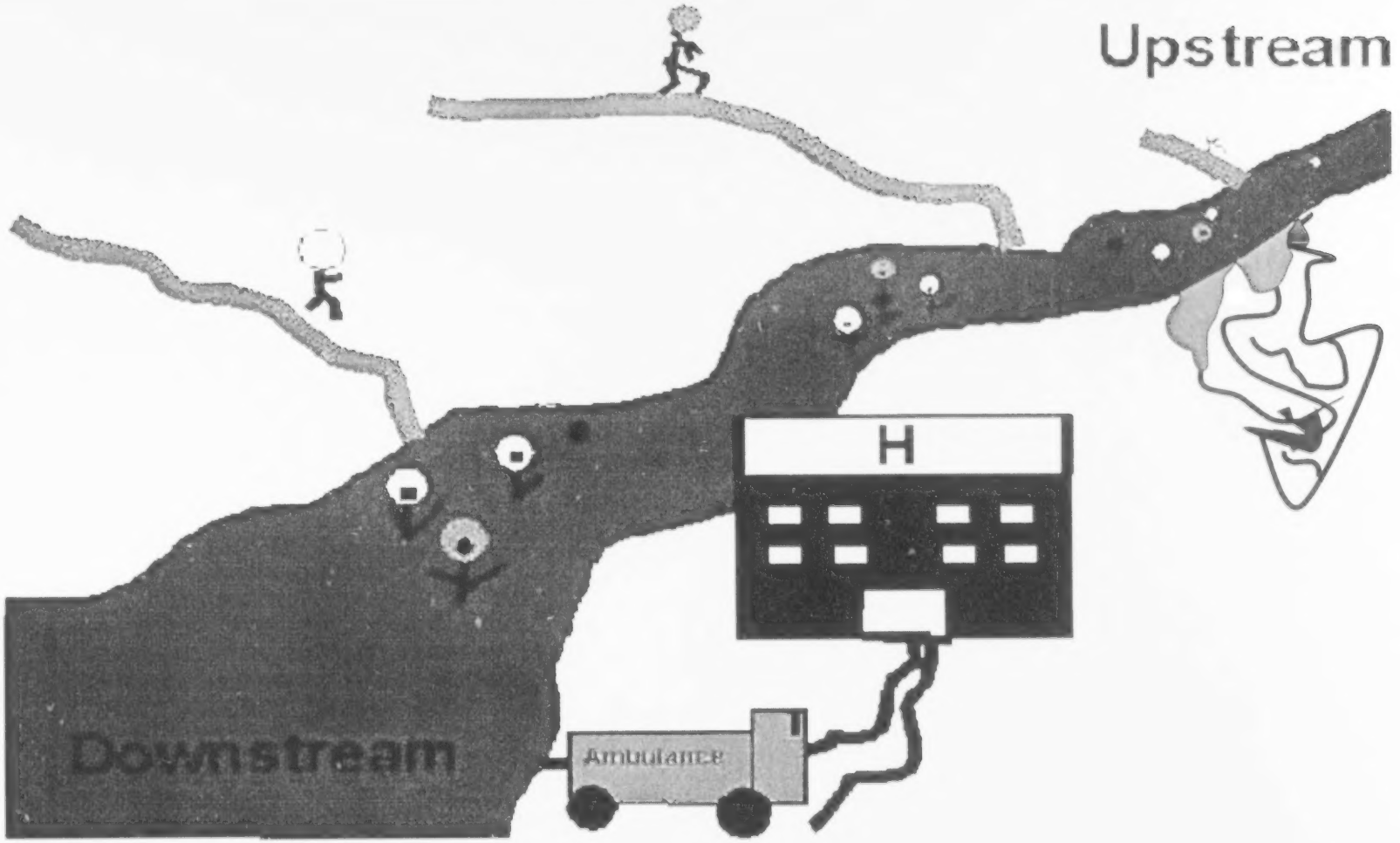
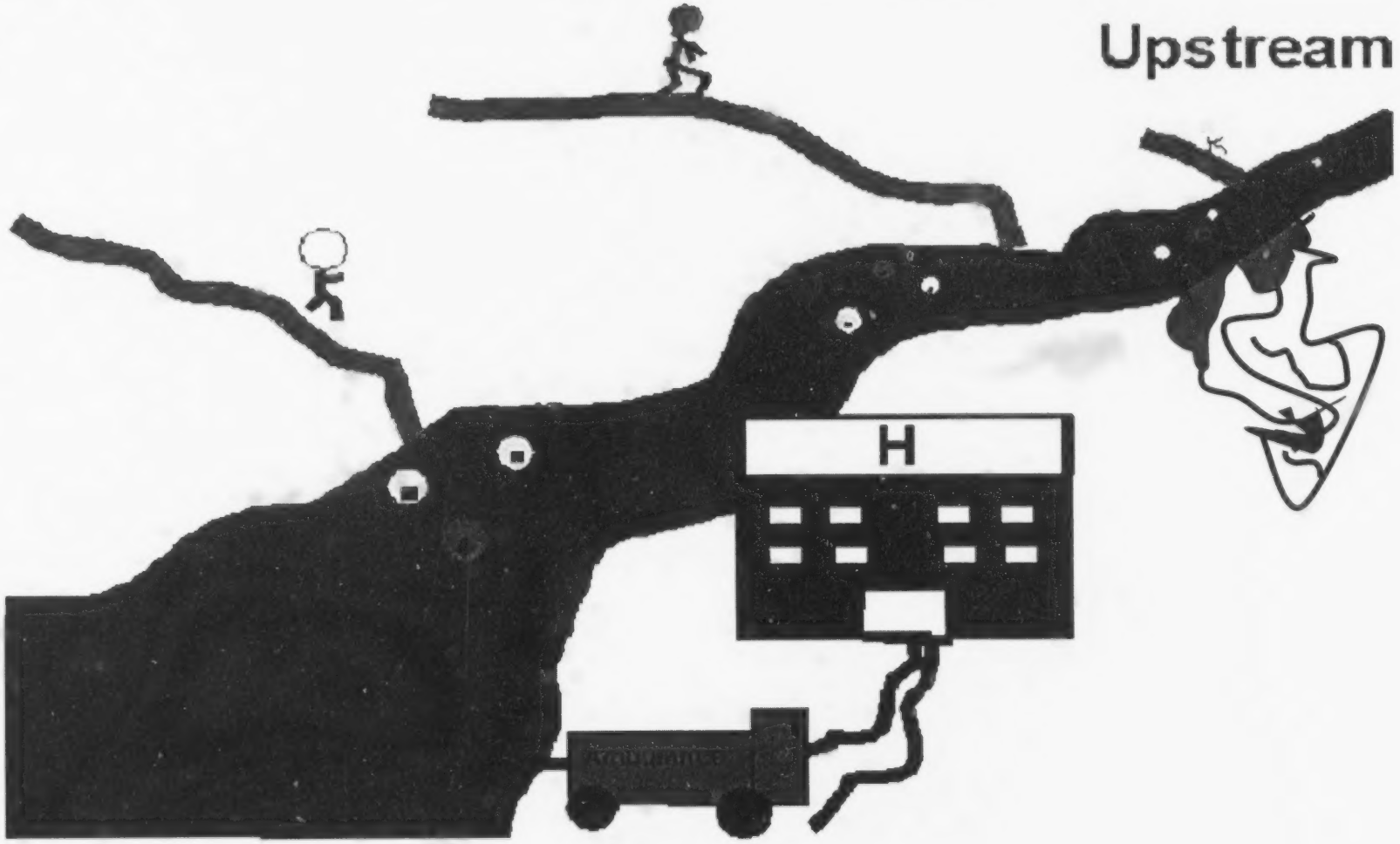
www.interiorhealth.ca

Move Upstream

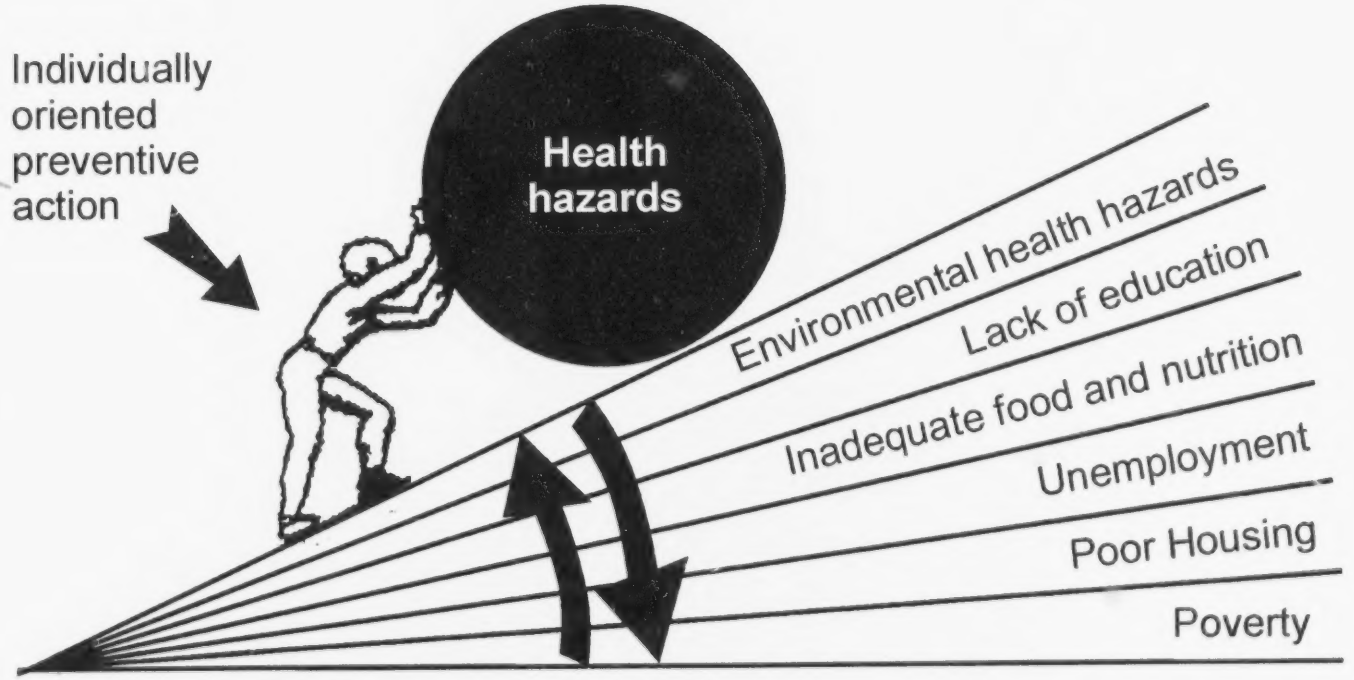


Move Upstream



Collaboration Required

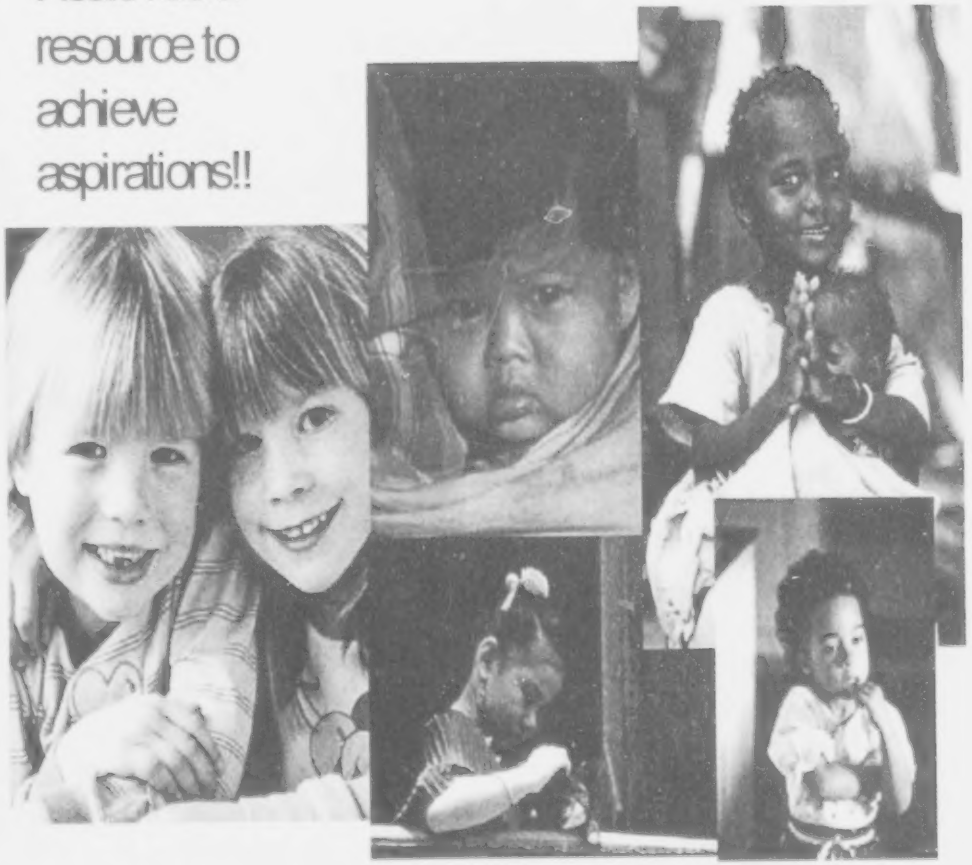
The Health Gradient



Source: adapted from Making Partners: intersectoral action for health.

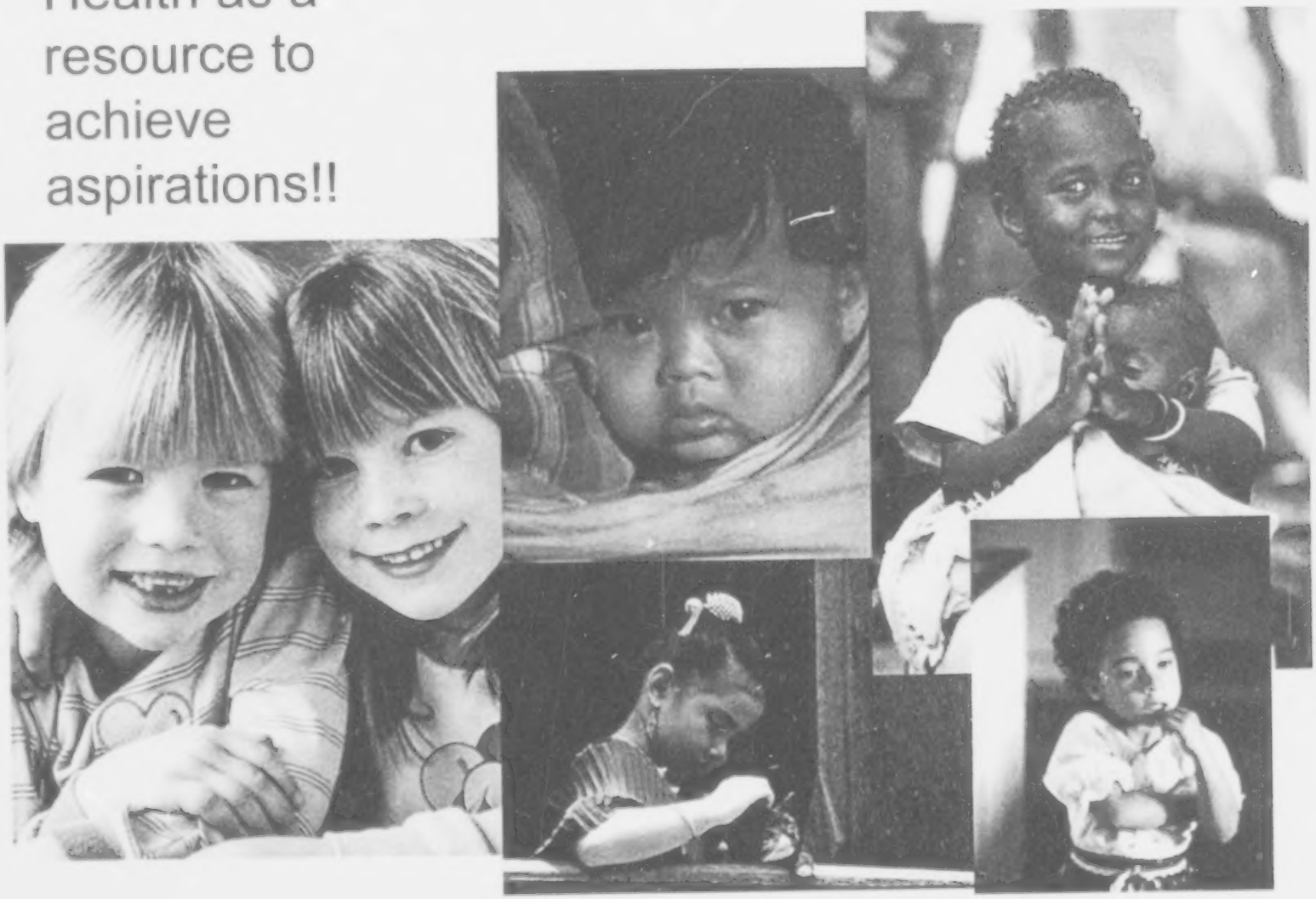
An Environmental Health Legacy of Equitable Opportunity for Every Child in the Columbia Basin

Health as a resource to achieve aspirations!!



ron.dovell@interiorhealth.ca

Health as a resource to achieve aspirations!!



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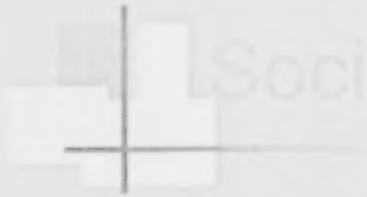


Social Planning Cowichan

PRESENTATION TO

Community Forum

By The

Social Planning Visioning Committee

March 27, 2004

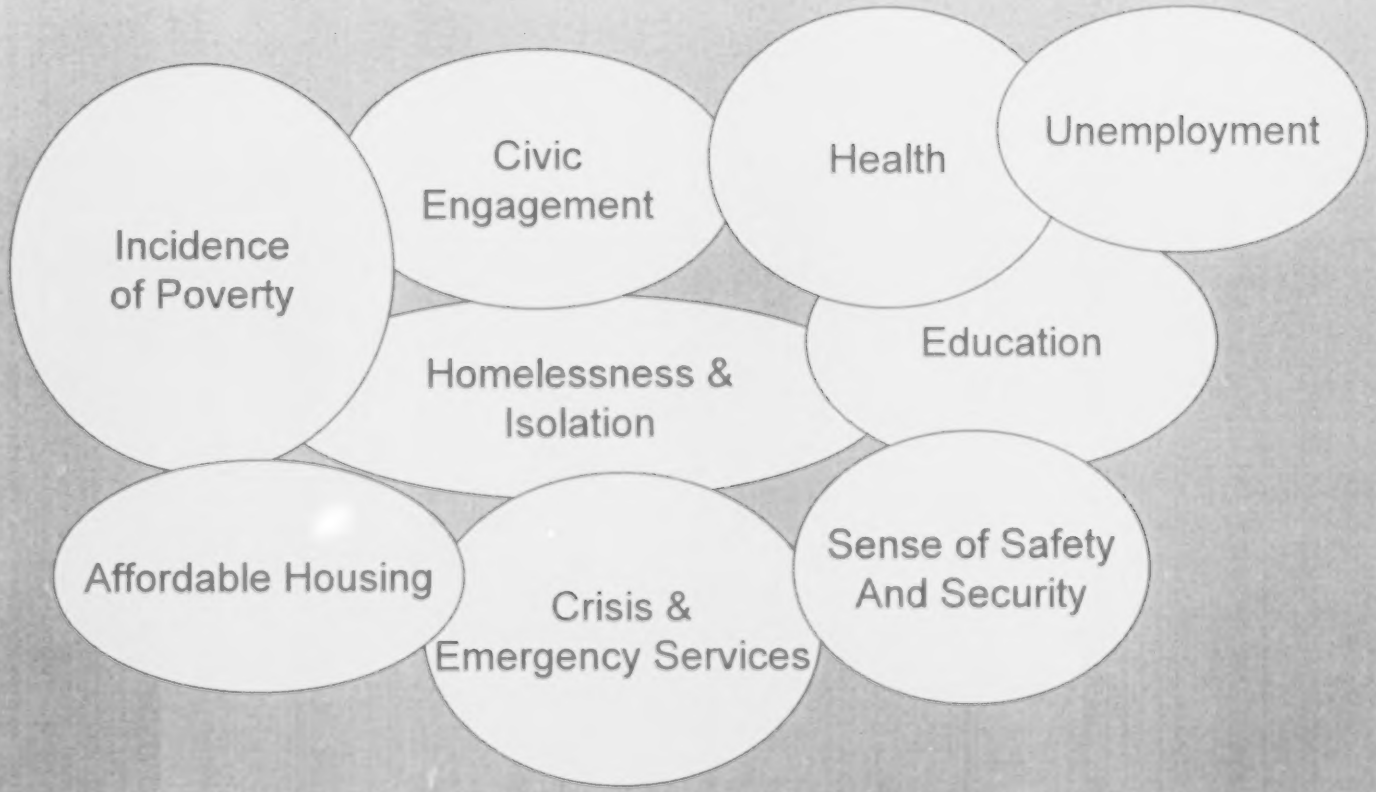
Summary to Date

- Visioning Committee was established by community members in open forum June 1, 2002.
- The committee developed a consultative approach to reach the broad spectrum of community on Social Planning issues.
  - Do we need Social Planning?
  - If so, why? What tangible benefits are there?
  - What should it look like?
  - How does it have authority and accountability?
- The Social Planning Cowichan model was developed and tested with individuals and later in an open forum.

Definition of Social Planning

- The objective of Social Planning is to build community well-being, using an open and accessible process which is available to all.

Community Health Indicators



The Process

- The Social Planning process brings together citizens, community organizations and governments to identify the social impact of issues and opportunities (environmental, economic, physical or cultural) in a community, and to develop strategies for working together for improvement.

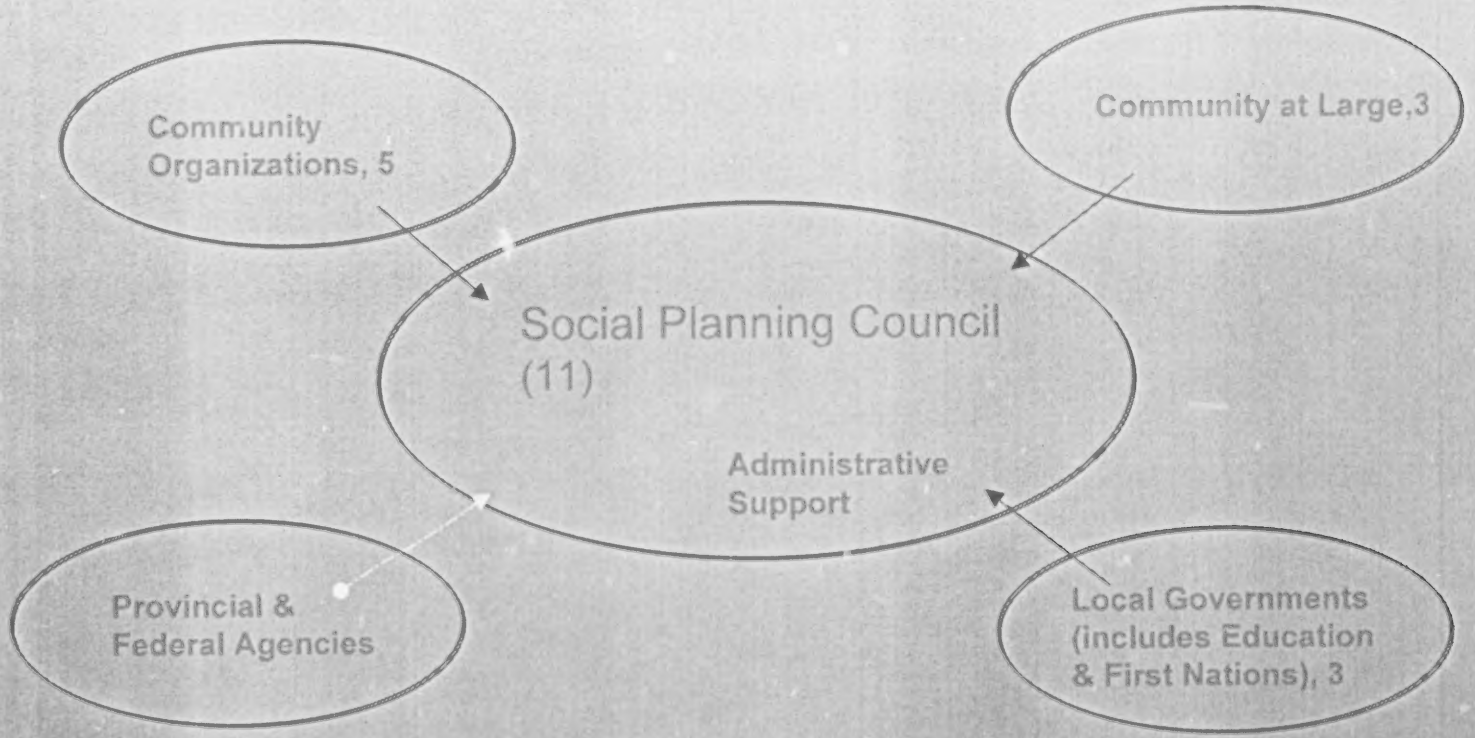
Social Planning Does ...

- Coordinate and communicate
- Research social development issues in communities
- Plan to improve social health of communities
- Work with the community to set social development priorities
- Work with the community, governments and delivery agents to implement an overall social development plan
- Support community plans in conjunction with economic planning
- Act as a resource for social service information
- Facilitate action by community groups to address social issues
- Mobilize resources to effectively reach community vision

Social Planning Does Not...

- Deliver or provide social services
- Oversee or supervise social service delivery by other groups or agencies
- Duplicate existing efforts in the community
- Fragment social service delivery in the community
- Determine funding for community agencies
- Work in isolation from other community planning initiatives

Social Planning Cowichan Model


Community Organizations, 5
Community at Large,3
Social Planning Council (11)
Administrative Support
Provincial & Federal Agencies
Local Governments (includes Education & First Nations), 3

Social Planning Cowichan Mission Statement

Social Planning Cowichan believes all citizens have a right and a responsibility to determine the social health of their community. We will act as a means to define and address social health in the Cowichan Region and we will engage with all who wish to strengthen community well-being.

Social Planning Cowichan Goals

1. Develop specific action strategies to address social issues
2. Educate the community about social planning issues to promote broader and deeper community understanding of issues that affect quality of life, and/or economic and social inclusion
3. Advocate and serve as a catalyst for change around community concerns
4. Build community consensus on issues or shared action

Core Functions of Social Planning

- Remain independent and non-partisan
- Liaise effectively with community service agencies
- Support actions that will advance the social health of the community
- Undertake independent research on social trends, needs and issues within appropriate constituencies
- Review current trends and needs, and advise on social impacts

/more

Core Functions of Social Planning

.../cont'd

- Educate the community to broaden understanding of social issues which affect the quality of community life
- Advocate consultative and interdisciplinary approaches to planning, policy analysis, and problem solving within society
- Establish information networks, problem-solving partnerships, and action coalitions

Community Focus

and Social Planning

- Identify community needs and trends
- Liaise and consult with service providers on issues and trends
- Service planning, facilitation and coordination

Needs & Benefits for:

- Community Organizations
- Community at Large
- Local Governments (includes Education & First Nations)
- Federal & Provincial Governments

Needs & Benefits for Community Organizations

Social Planning Cowichan would address issues relating to the development of programs and services to address the community's priorities for social development in order to:

- Ensure that community organizations understand social priorities and work together to address them
- Implement the community's social plan
- identify, assess and respond to prospective senior government program/funding changes and impacts on the Cowichan Region
- examine coordination opportunities
- consider service delivery issues based on an informed community perspective
- develop recommendations for service delivery

Needs and Benefits for the Community at Large

Social Planning Cowichan will:

- carry out research on key social issues
- enhance existing planning processes
- provide linkages to available resources
- provide educational and advocacy assistance
- provide a venue for communication and dialogue
- offer other support as appropriate and as it fits within the mandate of the Social Planning Council

Needs & Benefits for Local Governments

- Local governments have a critical role in shaping the community. Many of their policies, programs and practices are directly linked to providing the quality of life the community desires and expects.
- Social Planning Cowichan could assist local governments by providing a social development perspective on policies, programs and practices as required

For Local Governments, some benefits of Social Planning are ...

- To monitor and advise on social issues in the community
- To assist in the development of social goals, objectives and policies in Community Plans
- To host forums on community issues
- To provide an arms length mechanism for dealing with provincial social service delivery agencies
- To cooperate with environmental and economic initiatives undertaken by others (i.e. the Economic Development Commission).
- To conduct research on issues and assist in setting priorities

Needs & Benefits for Federal & Provincial Agencies

- Provincial social service departments are facing organizational change and increased budget pressures. Since there has been no central point of contact in our communities, these changes occur without the benefit of local input and without a body to communicate those changes to.

In Summary ...

- Social Planning Cowichan will be a means to assist in developing a long term plan to create a more cohesive community while improving quality of life for everyone.
- The "Three Pillars" of a healthy community are its vibrant economy, healthy environment, and strong community ties. To plan one without the others, would result in further "costs" now and in the future.

Social Planning Cowichan
Next Steps

- Unveil mission, goals, and structure of Social Planning Cowichan at a public forum on Saturday, March 27
- Recruit/appoint founding Directors of Social Planning Cowichan
- "Pass the Torch" from the Visioning Committee to Social Planning Cowichan Board at a joint planning session in late April
- Hold inaugural meeting of new Social Planning Council

You Can Get Involved!

- Your interest in Social Planning Cowichan can be furthered in several ways:
  - Find out about the nomination process
  - Consider nominations for the three local government seats on the Social Planning Cowichan Board
  - Go to the website to learn more and stay informed.
  - Contact us.

How to Contact Us …

- Social Planning Cowichan

Telephone: 748-2133

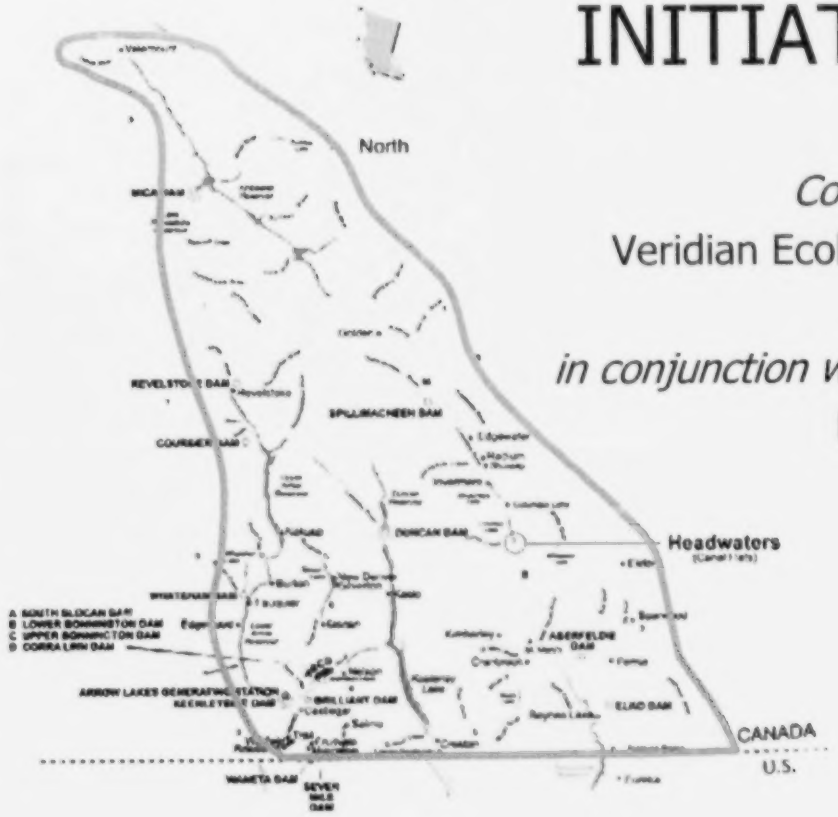
Email: info@socialplanningcowichan.ca

Website: www.socialplanningcowichan.ca

Thank You!

- We will be happy to answer your questions

STATE OF THE ENVIRONMENT REPORTING:
INFORMATION GATHERING INITIATIVE



Contract Awarded:

Veridian Ecological Consulting, Nelson.

Rachel Holt

in conjunction with: Greg Utzig, Cindy Pearce, Deb Mackillop

Definitions:

- State of Environment Reporting:
  - literally, a process for tracking and reporting on the 'State', or health of the environment in a particular area
  - "Environment" defined as the biophysical world
  - distinct from Sustainability Reporting - which usually includes economic and social indicators

Primary Objectives of Our Work

- Background information on State of Environment (SoE) systems
- Identify potential environmental indicators for Columbia Basin regional project
  - assess data requirements
  - availability
  - costs

In addition, we suggested:

- Providing a framework within which a SoE reporting system would operate
- Identifying any relevant linkages to broader *sustainability reporting*

Background Report

- Overview of a range of reporting systems worldwide
  - reviewed different approaches
    - pressure / state / response model, but focusing primarily on state initially
  - identified a list of considerations
  - developed a draft framework for SoE
  - identified the need to develop SoE independently, but tie in to broader framework

Background report: identified considerations

- Purpose
  - information about current condition
  - forecast future likely changes in conditions
  - identify which environmental conditions are significant and why
  - identify information needs
    - describe efforts of governments in addressing issues
    - comparison with other jurisdictions
    - report on effectiveness of policies relating to environment

Yes

No

Background report: identified considerations

- Audiences
  - public information
  - planning and operational personnel
  - policy and decision-makers
  - internal CBT
  - educational (though may need repackaging).

  - Agreement that all audiences should be served

Background report: identified considerations

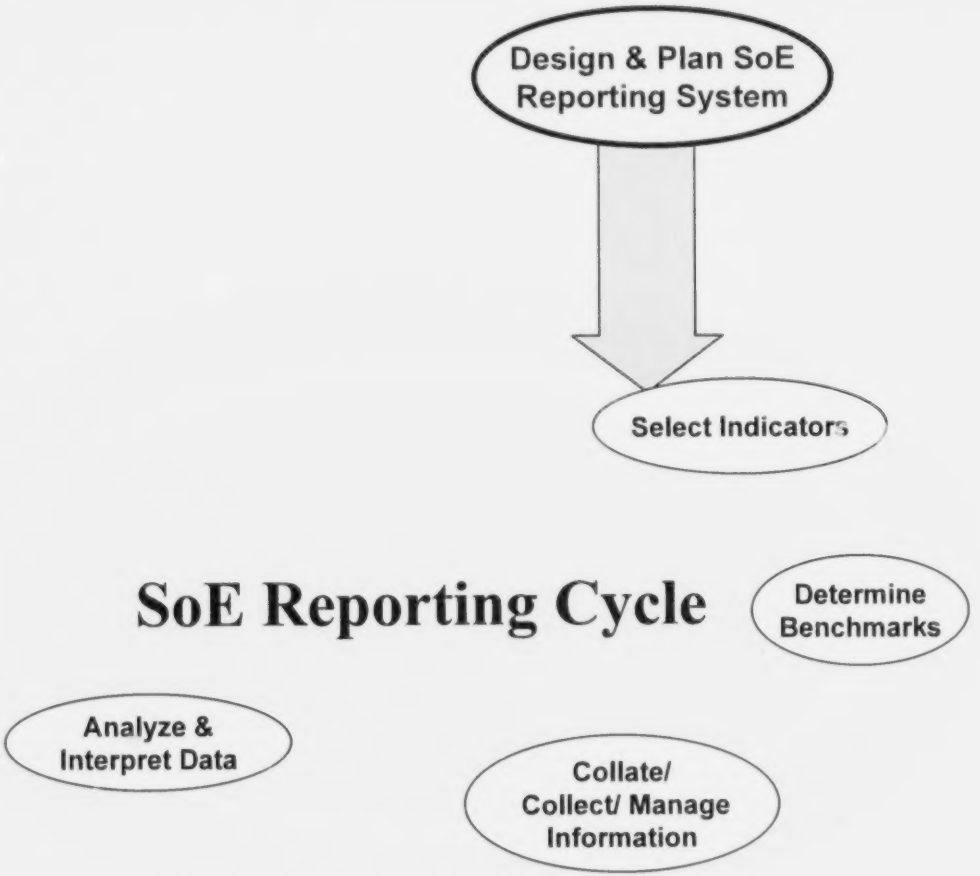
- Scope
  - develop robust state of environment reporting system
  - this can secondarily be encompassed into a sustainability reporting system as it is developed
  - links to development of social and economic indicators to develop an integrated framework

Background report: identified considerations

- Framework
  - initially design a 'state' reporting system
  - expand into a pressure-state-response model that identifies cause and effect where possible
  - work within larger framework to identify links to broader sustainability reporting

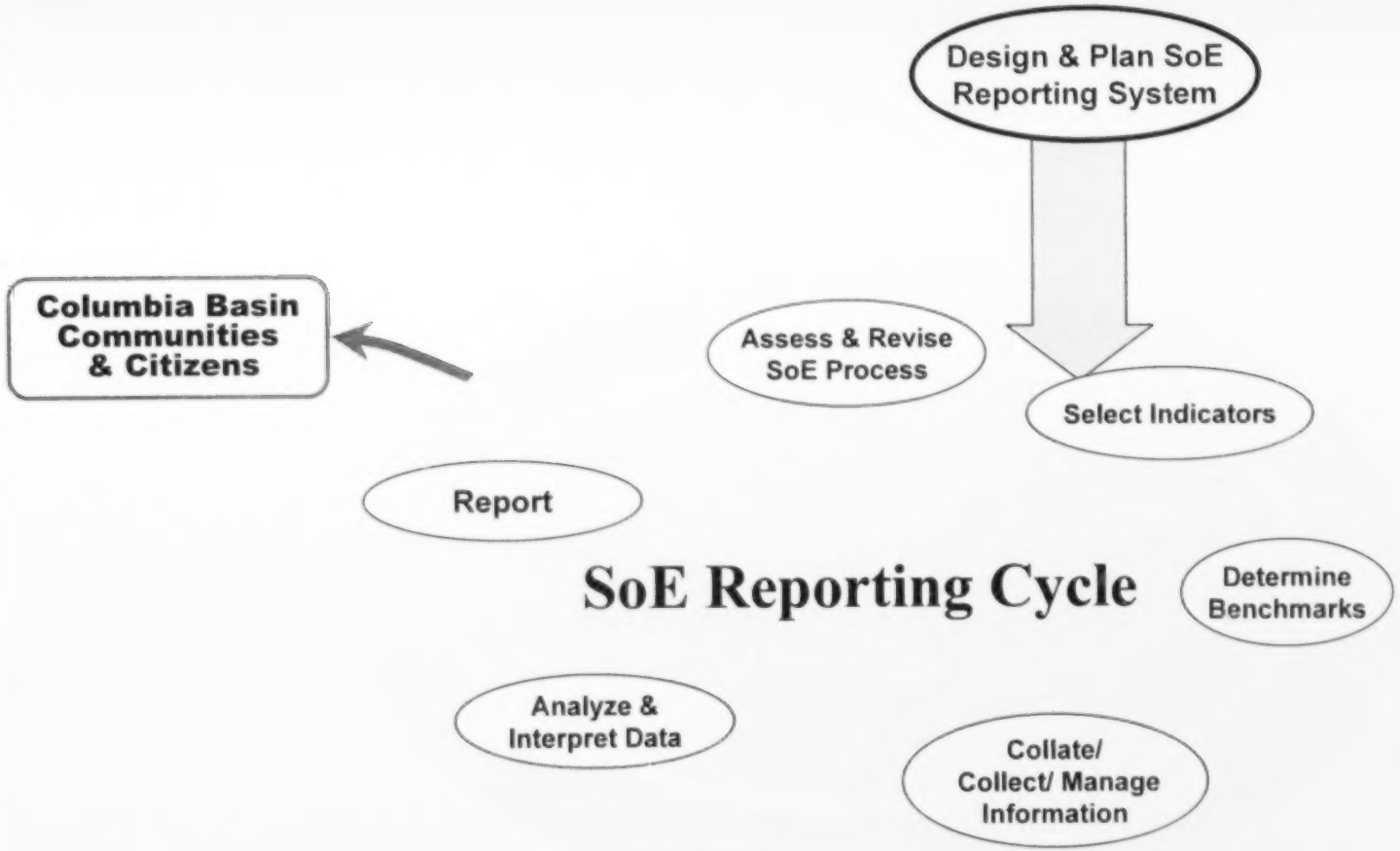
SoE Reporting Cycle

Draft State of the Environment Reporting Framework



Draft State of the Environment Reporting Framework

Draft State of the Environment Reporting Framework



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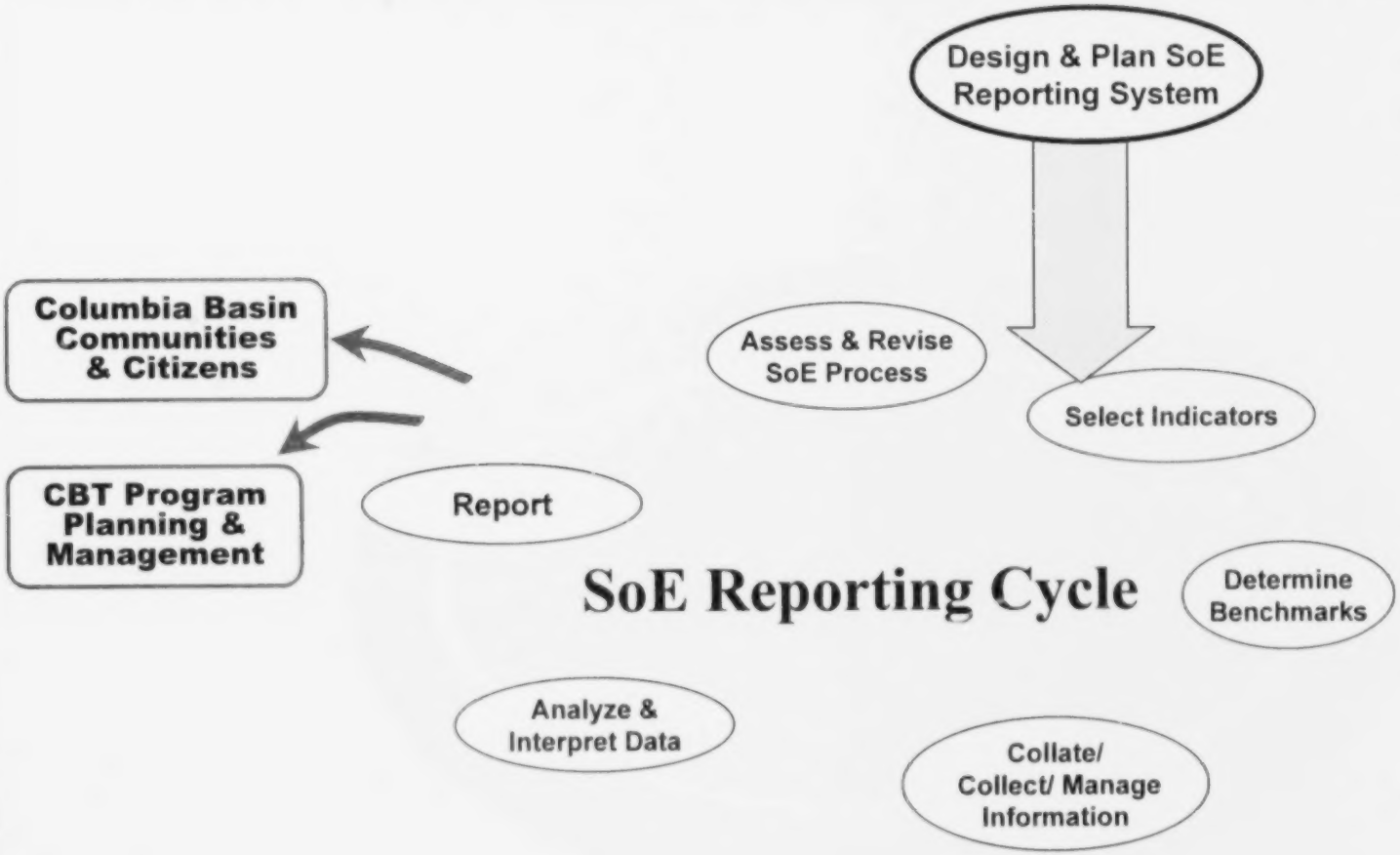

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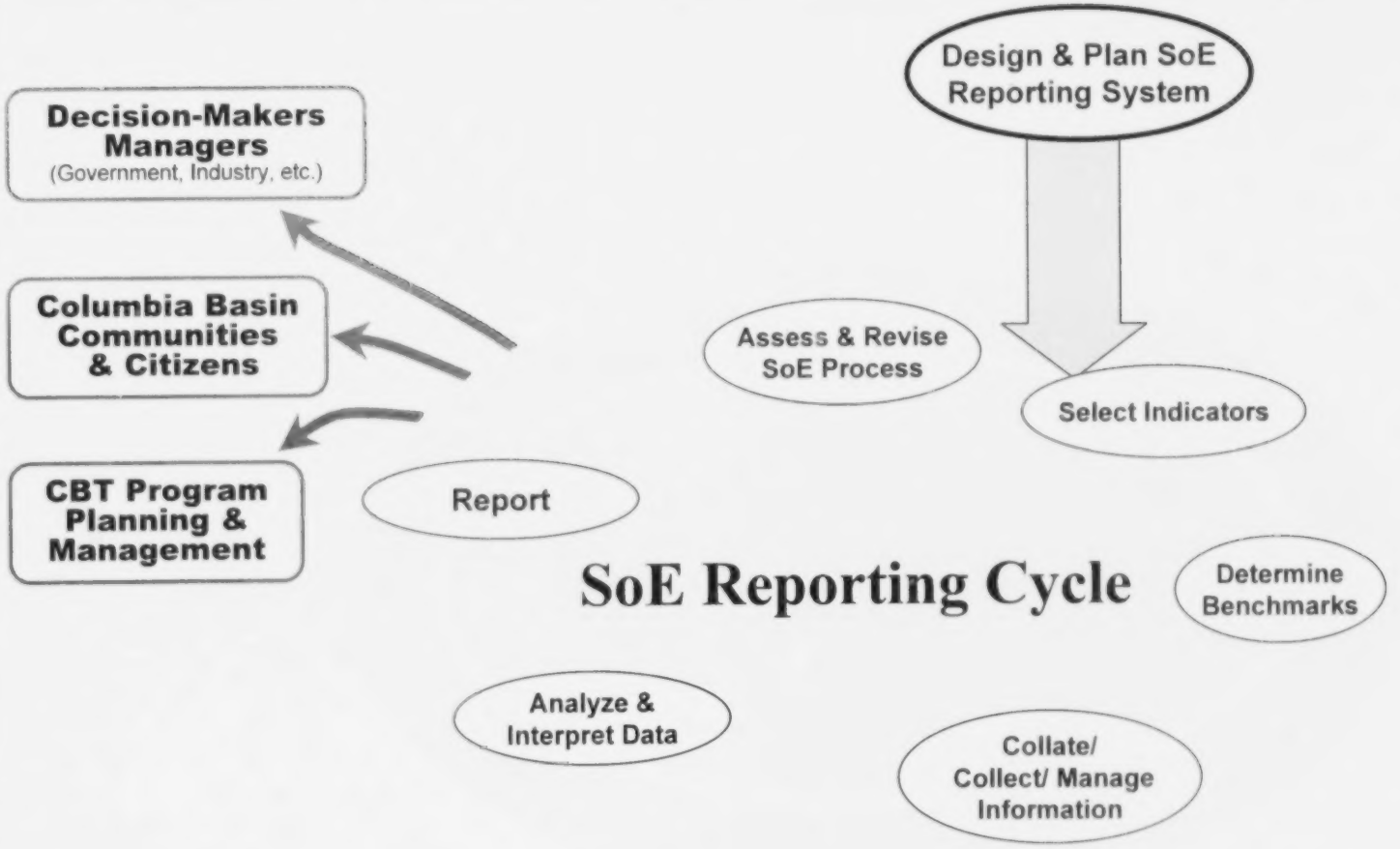

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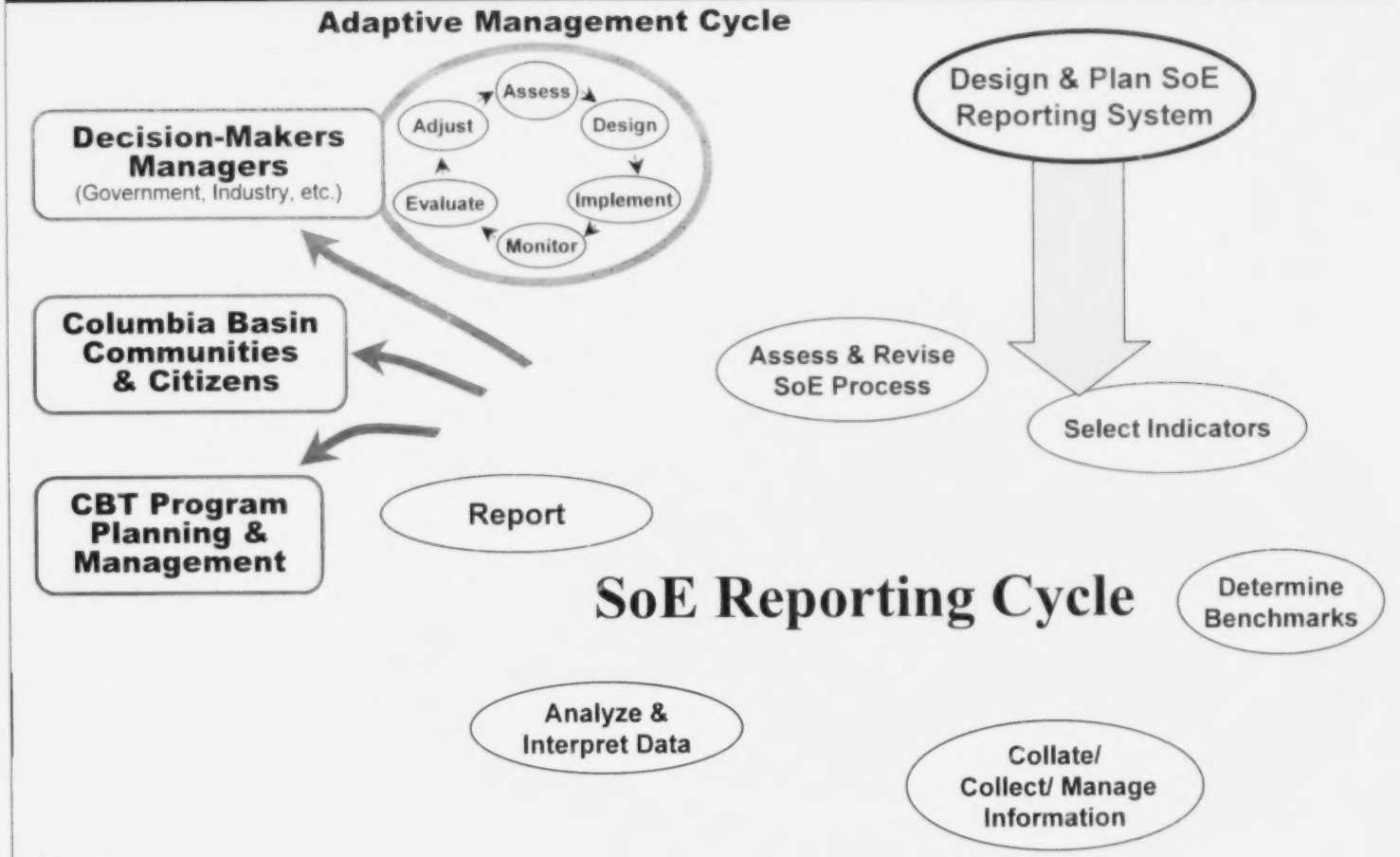


April 1, 2004
Kutenai Nature
Investigations Ltd

Adapted from Jones et al., 2002, Towards an Integrated Environmental Monitoring Strategy for BC Phase 1 Natural Resources - Draft

On-going Work

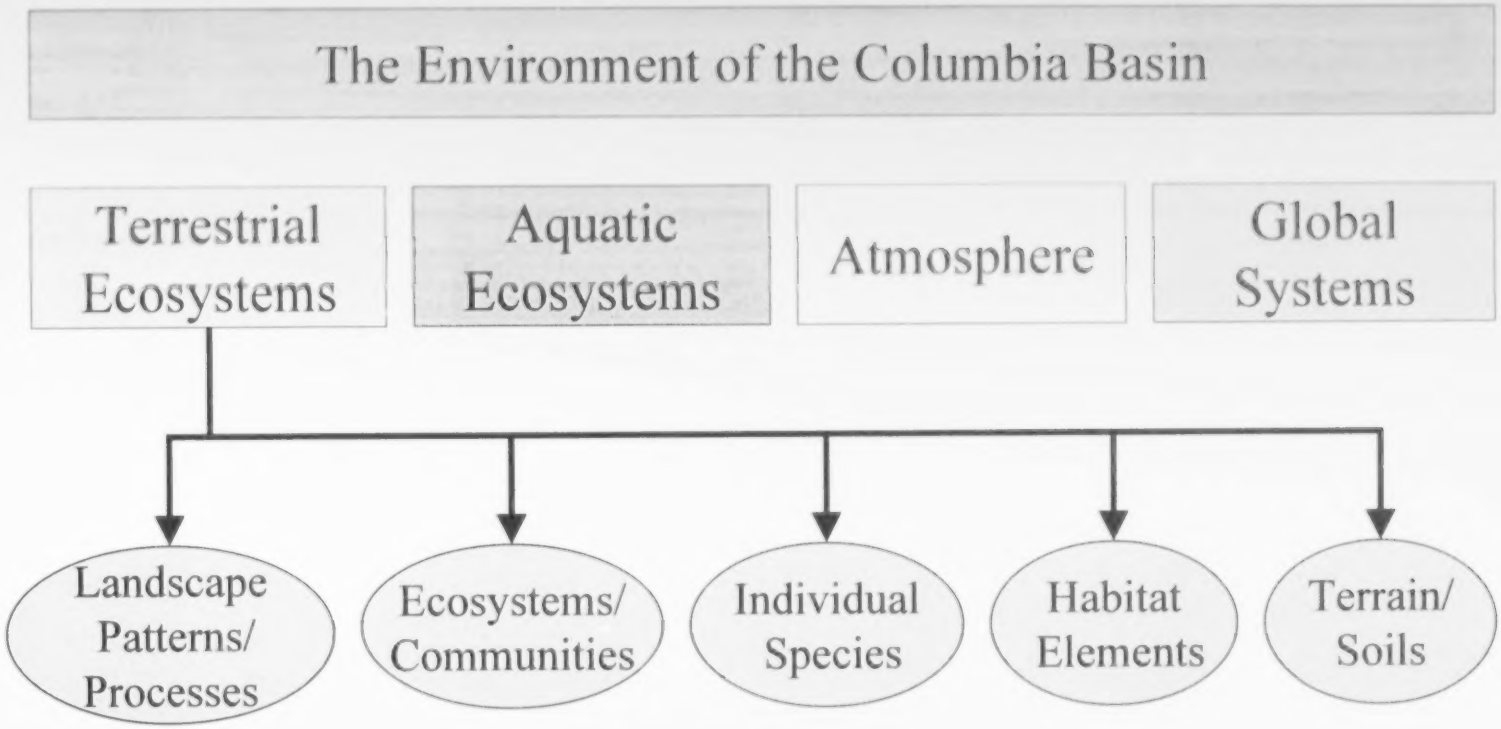
- Selection of indicators
- Data sources
- Resourcing
- Report content
- Presentation format – web-based, print-based, or both
- Frequency of publication / updating and monitoring

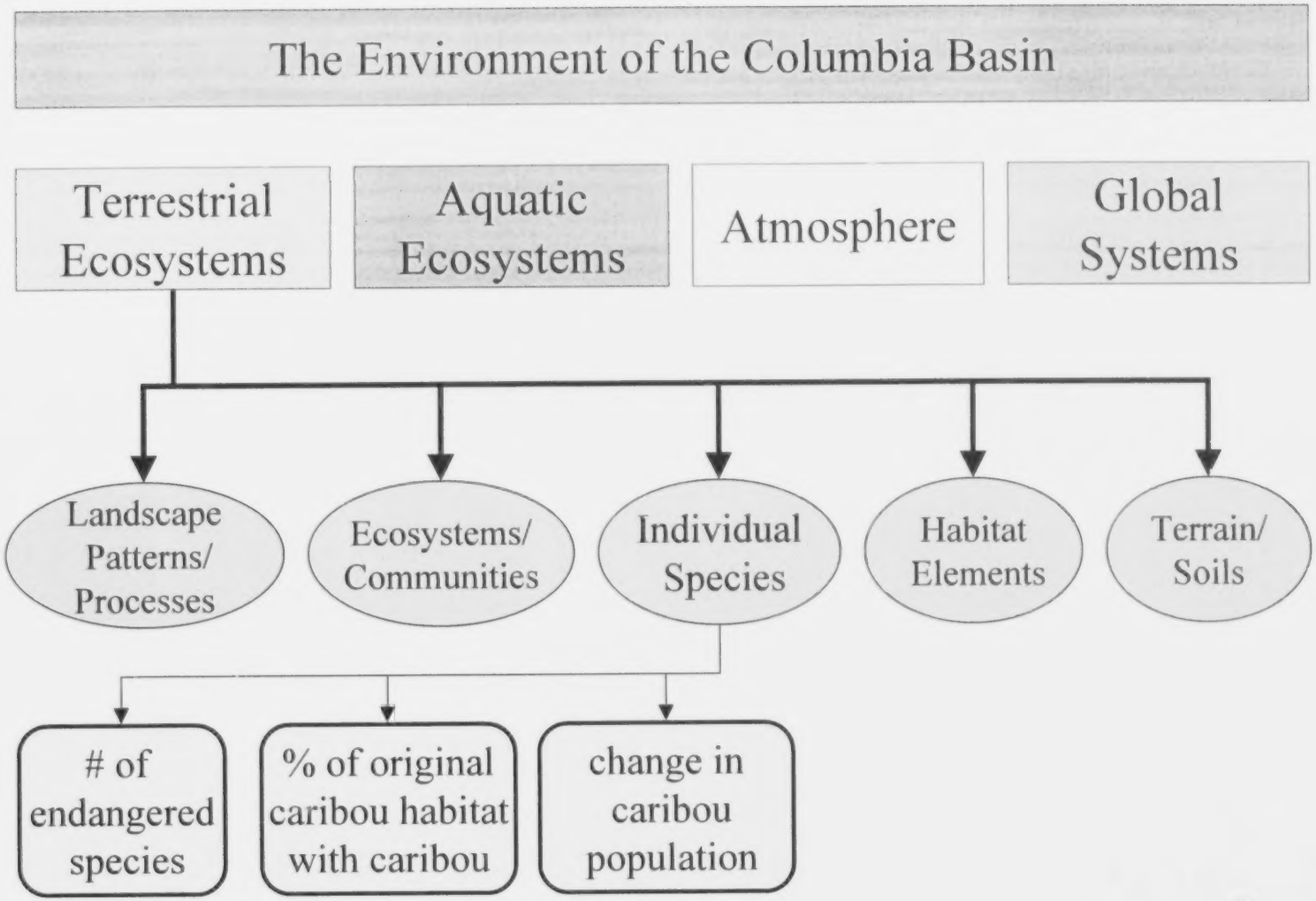
Indicator development

- Identify indicators by biophysical 'realm'. Broad list.
- Identify data sources
- Develop criteria to rank by a) how critical, and b) cost (availability of data/ post-processing etc.)
- Produce short list of
  - critical and do-able
  - less critical and do-able [for consideration now]
  - critical and less do-able [for future effort]
  - less critical and less do-able …
- Need to prioritize to make this feasible …..

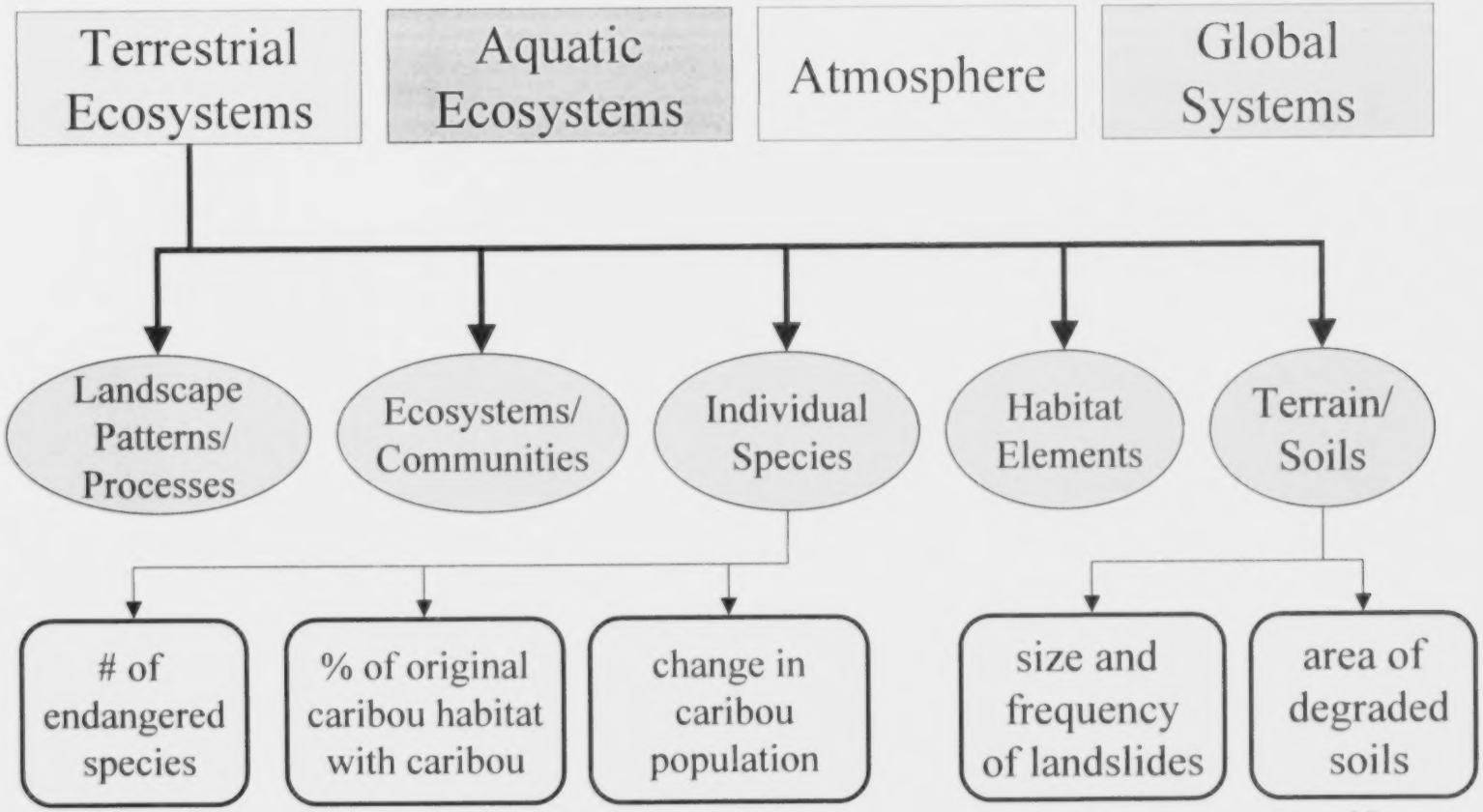
The Environment of the Columbia Basin

Terrestrial Ecosystems	Aquatic Ecosystems	Atmosphere	Global Systems


The Environment of the Columbia Basin
Terrestrial Ecosystems
Aquatic Ecosystems
Atmosphere
Global Systems
Landscape Patterns/ Processes
Ecosystems/ Communities
Individual Species
Habitat Elements
Terrain/ Soils


The Environment of the Columbia Basin
Terrestrial Ecosystems
Aquatic Ecosystems
Atmosphere
Global Systems
Landscape Patterns/ Processes
Ecosystems/ Communities
Individual Species
Habitat Elements
Terrain/ Soils
# of endangered species
% of original caribou habitat with caribou
change in caribou population

The Environment of the Columbia Basin



Final Product

- report with detailed indicators and data sources for SoE reporting - prioritized by how critical and by cost
- framework elaborated on with discussion of links to broader sustainability reporting

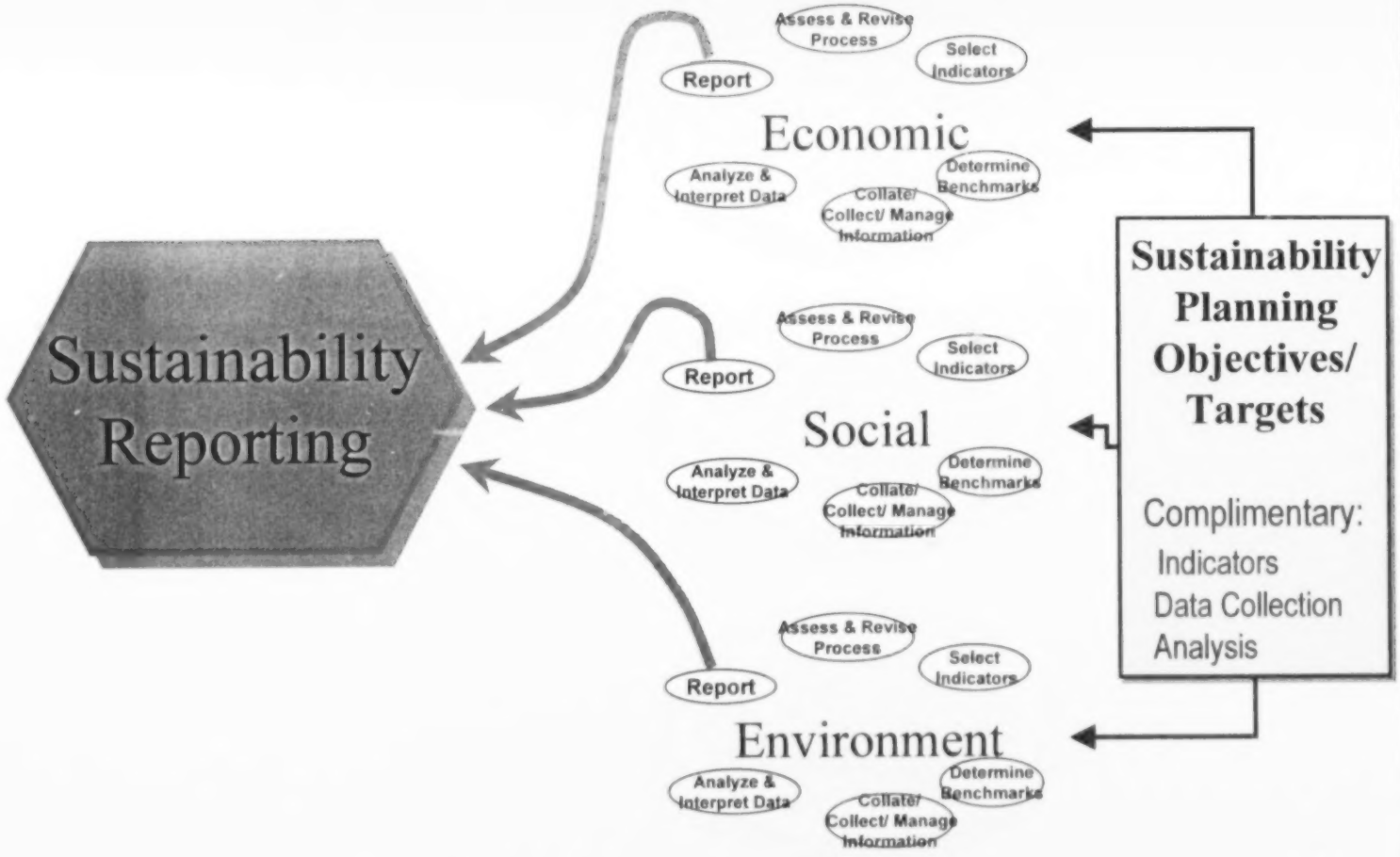
Sustainability reporting

- Broader level of reporting that includes
  - environment
  - social
  - economic
- Intent is to report on movement toward/ achievement of sustainability
- Desired outcome is a change in behavior to support sustainability

DRAFT PROPOSED Sustainability Reporting Framework

DRAFT PROPOSED Sustainability Reporting Framework

DRAFT PROPOSED Sustainability Reporting Framework



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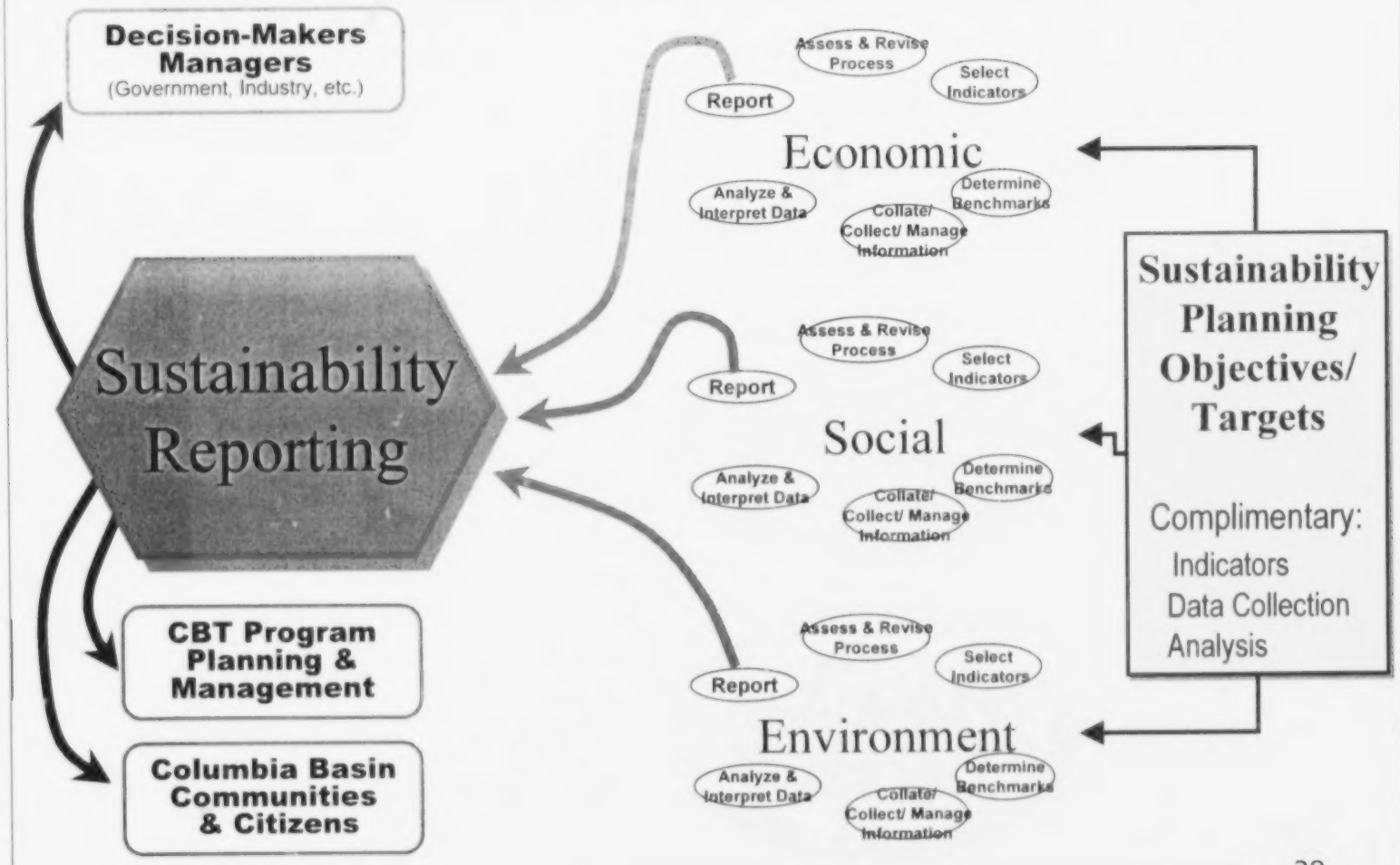

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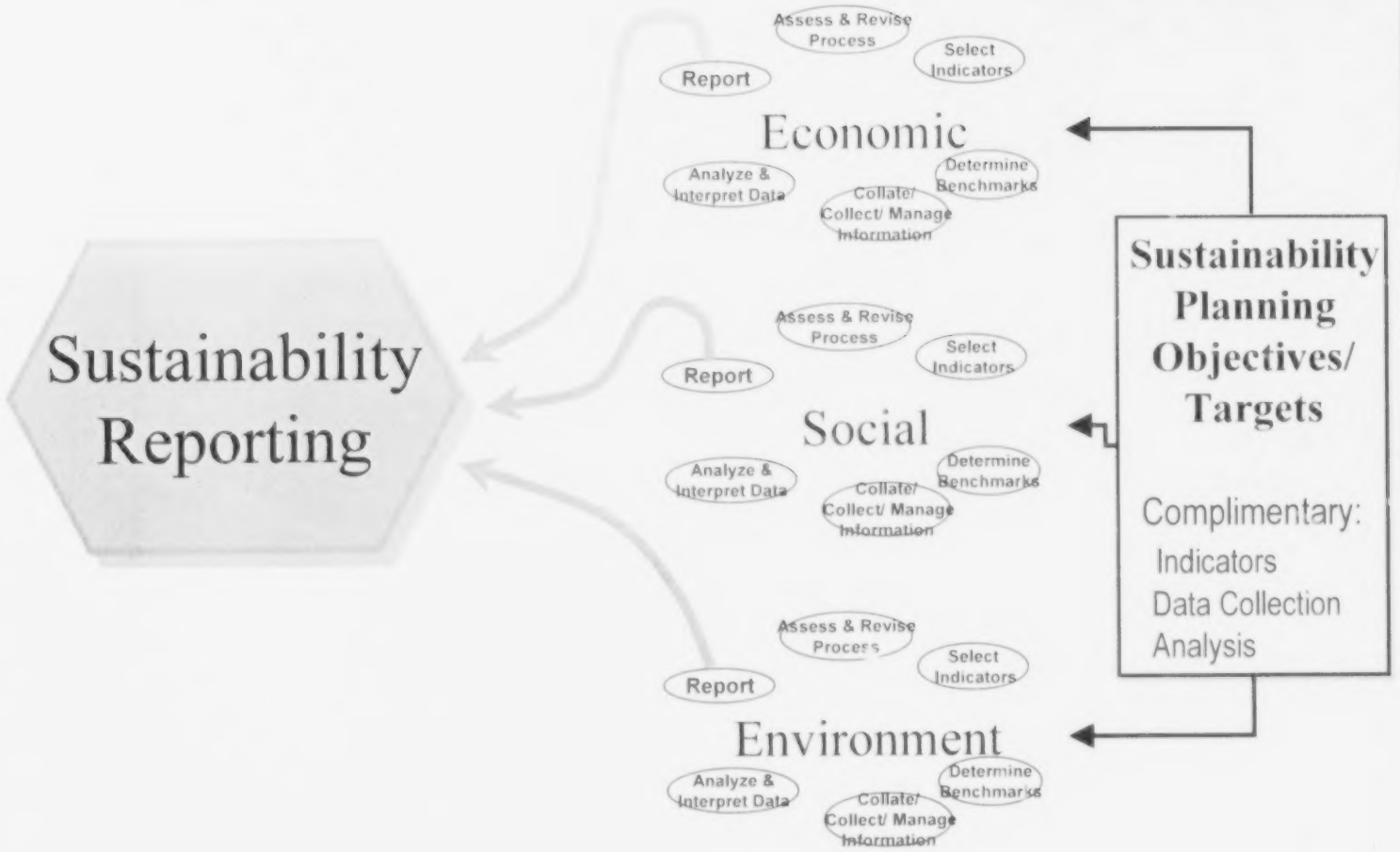

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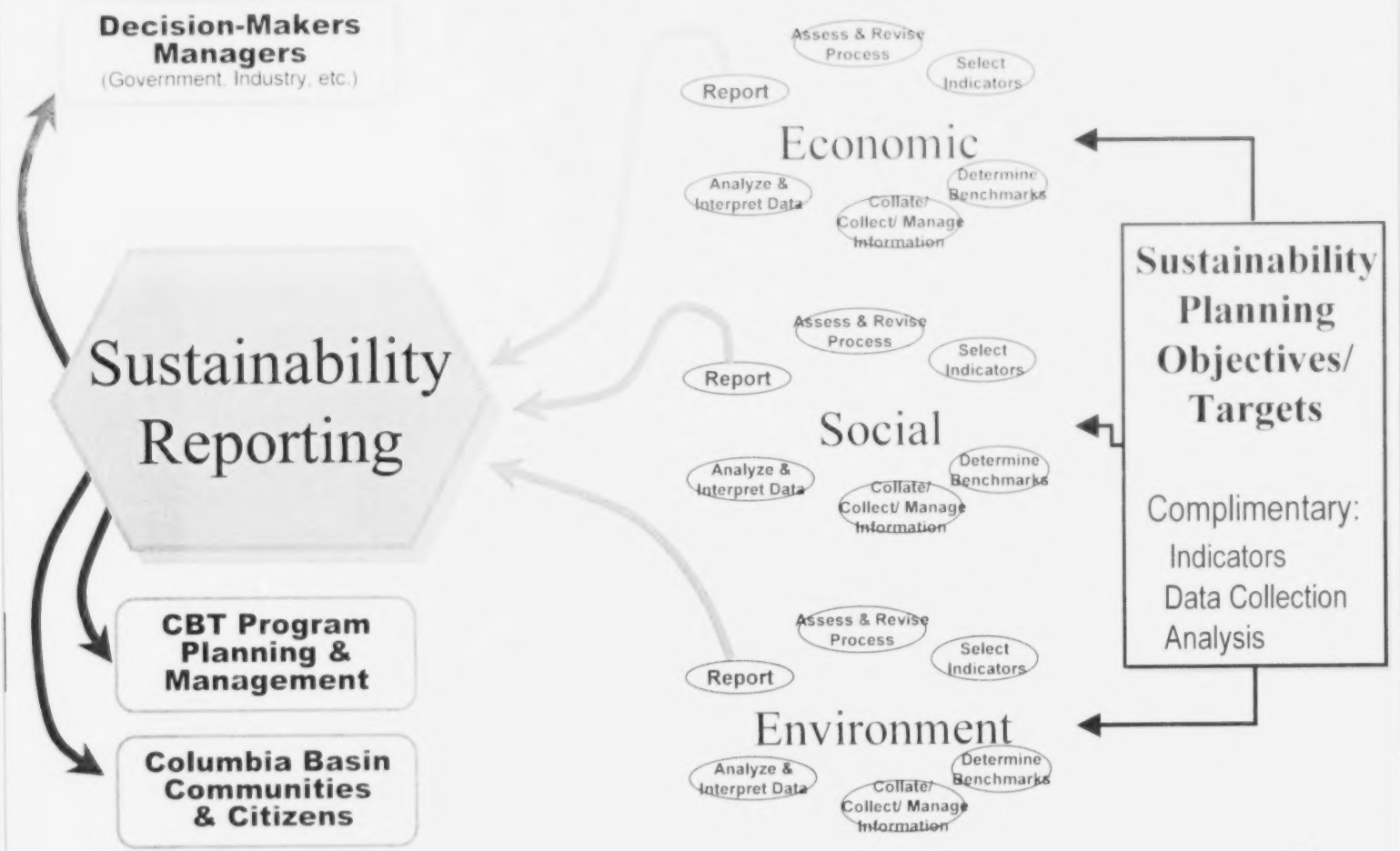

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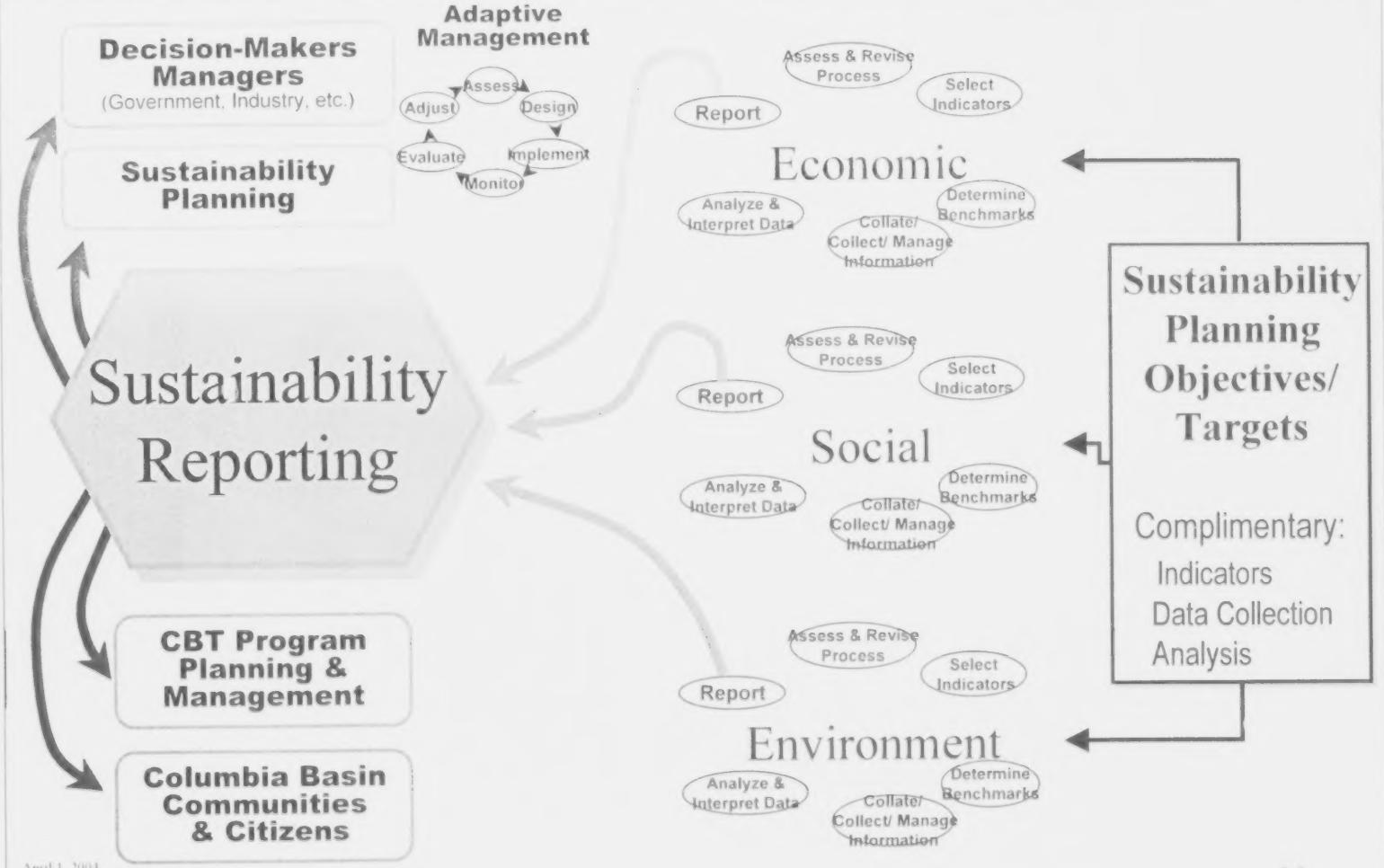

April 1, 2004
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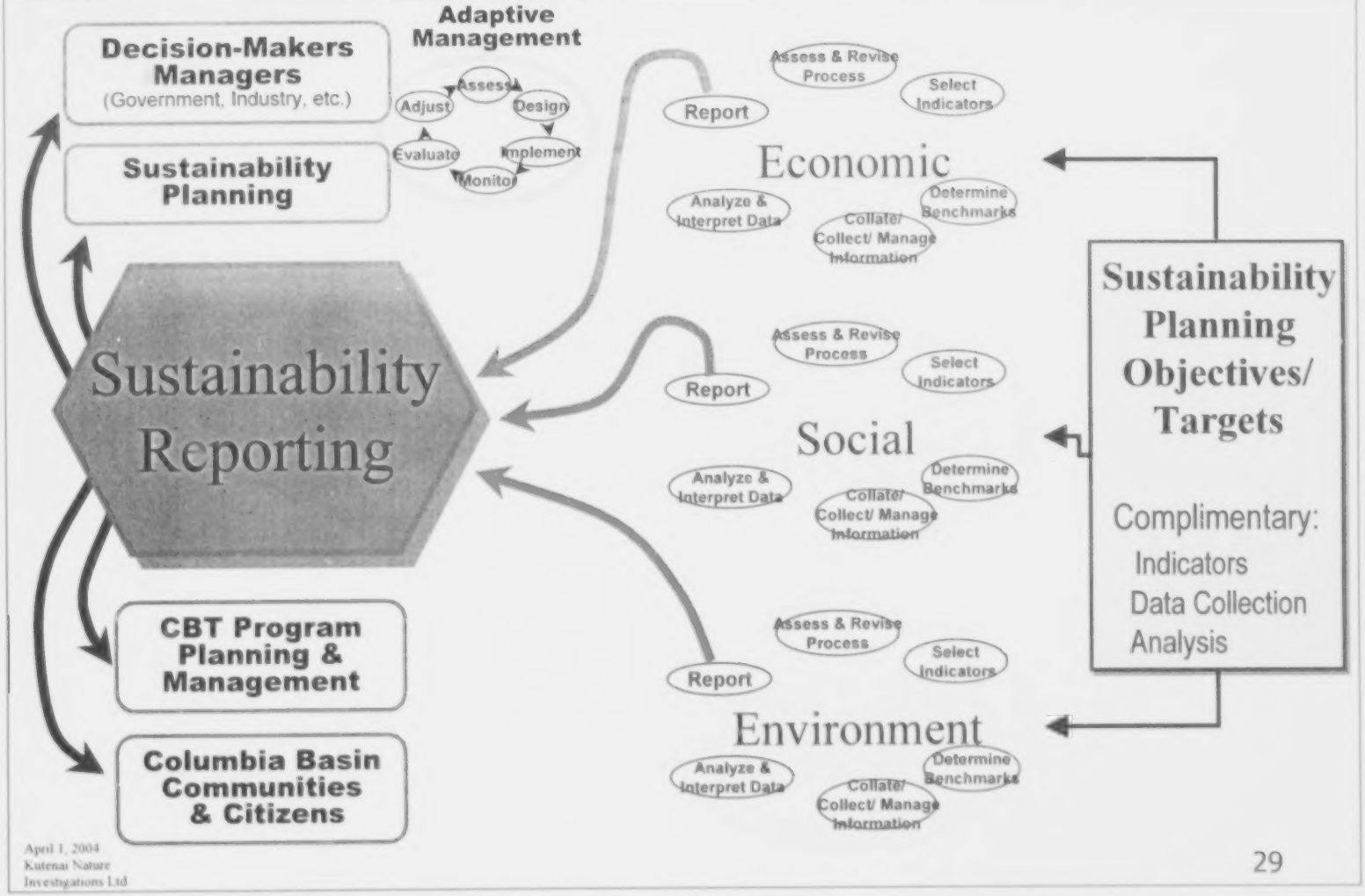

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Challenges to Sustainability Reporting

- lack of existing prototypes
- achieving balance across sectors
- successfully integrating sectors across complex administrative jurisdictions
- capacity in sustainability planning and assessment in all sectors and communities
- resourcing - data collection and analysis

OPPORTUNITY FOR DISCUSSION

END

Population Health: Changing Communities and their Quality of Life

Ronald Labonte
Saskatchewan Population Health and Evaluation Research Unit
Universities of Saskatchewan and Regina
www.spheru.ca

Acknowledgements

- Ron Colman and the *Genuine Progress Indicator*
- The Atkinson Foundation and the *Canadian Index of Wellbeing*
- Trevor Hancock and the *Community, Environment, Economy* framework
- CUISR (Community University Institute of Social Research, University of Saskatchewan) and the *Saskatoon QoL Project* (in particular Nazeem Muhajarine and Allison Williams)
- Dennis Raphael and the *Toronto QoL Project*

haelo

hello
whole
health
holy

Our health is defined by the quality of our relationships with others...

...and by our relationship to the web of planetary life...

Community:

To have the quality of sharing and caring

Goals

- Examine population health determinants—how our social and physical environments affect our health & quality of life
- Examine what a population health approach adds to community planning
- Share examples and lessons about community and partnership engagements in community planning for health & quality of life

When was the last time you felt healthy?

Buzz around a few words that describe this...

What Makes Us Feel Healthy?

feeling vital, full of energy
having a sense of purpose in life
experiencing a connectedness to "community"
being able to do things one enjoys
having good social relationships
experiencing a sense of control over one's life and one's living conditions

Laborde, 1993, 1998

Source: Laborde, 1993

So what?

- Absence of the M&Ms…health as one of our capacities 'to live a life we have reason to value' (Sen, 2000)
- Preventing disease & disability important as *means* to the *end* of feeling healthy
- Beware of 'terminal hardening of the categories' – we get the answers we want by the questions we ask
- Indicators for 'positive health'

Population health (two forms):

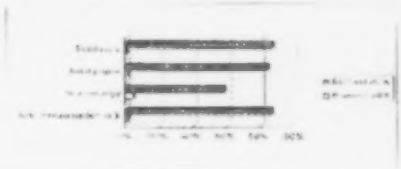
1. Improving aggregate health status by reducing prevalence of risk factors (medical, behavioural) in a given population
2. Reducing inequities in health status between groups by reducing inequalities in access to key resources for (determinants of) health (socioenvironmental or socioecological)

Population health as:

- *Outcomes* (health status variables disaggregated by various equity stratifiers such as income, gender, ethnicity, class, region)
- *Inputs* (measures of various social, economic and environmental determinants of health/quality of life)

Equity Stratifiers: Sustainability

Increase the economic output of the poor, and/or decrease the economic consumption of the rich?



Source: CIVIC 2004, draft report

Equity Stratifiers: Gender & Unpaid Work

"The services rendered by women enter into the dividend when they are rendered in exchange for wages, whether in factory or in the home, but do not enter into it when they are rendered by mothers and wives gratuitously to their own families. Thus, if a man marries his housekeeper or his cook, the national dividend is diminished."

Economist Cecil Pigou, 1932

If we hire a housekeeper, GDP goes up.
When we marry a housekeeper, GDP goes down.

Quality of Life

- Arose from social indicators movement
- Policy relevancy or research interests than "capture attention of political decision-makers" ... (though policy relevancy doesn't hurt)
- ... "confront major [neo-liberal] ideologies" and "deterioration of the welfare state arrangements in developed as well as developing countries." (Vogel, 1997)

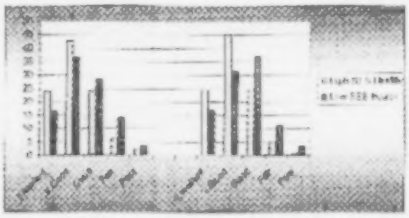
Hancock, Labonte & Edwards, 2000

Dimensions of Quality of Life

- Self-rated "overall" QoL
- Well-being (positive health)
- Life satisfaction
- Happiness (the hedonistic element)
- Stress/anxiety (negative measure)
- Role of place-based (contextual) characteristics in above

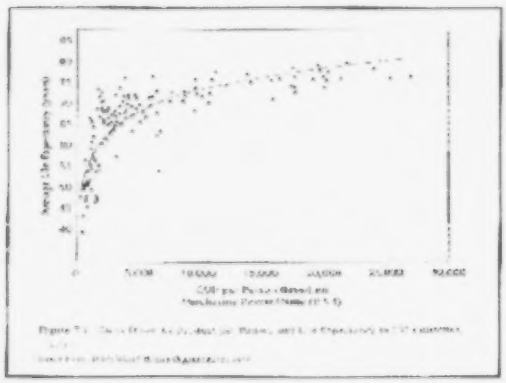
Hancock, Labonte & Edwards, 2000

Self-rated health and quality of life by SES status, Saskatoon, 2001



Health Quality of Life

N = 971. Source: [illegible]



When inequalities become too great, the idea of community becomes impossible...

Raymond Aron, early 20th century

Self-rated health and quality of life by income comparison, Saskatoon, 2001

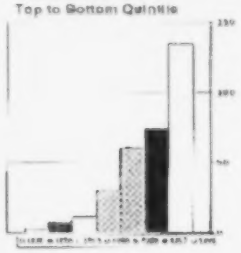
Logistic regression model controlling for all significant individual and place-based characteristics

Health	Odds ratio	*P* value
Well-off	3.14	< .05
Adequate	2.69	< .05
QoL	**Odds ratio**	***P* value**
Well-off	8.24	< .01
Adequate	4.23	< .001

N = 917. Source: Unpublished data, CHASP Quality of Life Study, 2001

Growing Income Inequalities

Global Income Ratio
Top to Bottom Quintile



Corporate Wage Gap
Ratio of CEO/Average Salary
1965 = 39:1
1997 = 254:1

Income Distribution
Canada, 1982 - 1996
Upper half: $ gained 4.4%
Bottom half: $ lost 5.8%
Bottom 10%: $ lost 25%

Source: [illegible]

Canada: 1970-1999

Inflation adjusted average wealth

Upper 10%: gained 122%

Bottom 10%: lost 28%

Steve Kerstetter, *Rags and Riches: Wealth Inequality in Canada*
Ottawa: CCPA, December 2002

The story so far...

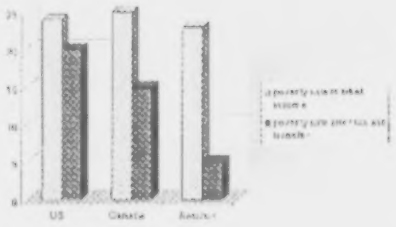
- Our experiences of 'being healthy' are defined by the quality of sharing and caring in our social relationships
- Our experiences of 'being unhealthy' (compared to others) are shaped by compositional features: our income, education, gender, social status.

The story so far...

- Our experiences of 'quality of life' are shaped by contextual features: our homes, neighbourhood, safety/security, physical environment and public services.
- A population health approach aims to improve equity (fairness) in peoples' access to social, economic and environmental conditions that determine their health/quality of life.

The urgency of the story...

- Inequalities rising globally, nationally, locally
- Planetary life support systems in rapid decline



Impacts of transfer programs on poverty rates, US (1994), Canada (1994) and Sweden (1992)

It depends on what we measure...

- Canadian Gross Domestic Product: the depletion of natural wealth is counted as economic gain.
- Bhutan's Gross National Happiness: a sustainable environment is counted as a determinant of happiness.
  - 26% of land is fully protected, pristine forests
  - Limits on number of tourists who visit these pristine wilderness areas
  - More happiness, but less wealth

The evidence on evidence

Statistics represent the belief in the power of numbers to move people deeply.

4,300 children in poor countries die each day from poverty-related diseases.

On The Need To Combine Qualitative And Quantitative

- Objective measures run the risk of imposing "expert" opinion over "lay" importance.
- Subjective measures run the risk of "top of the mind" or people inured to living in objectively awful conditions, "yup, life is pretty good..."

The evidence on evidence (cont.)

"So, population health is about research evidence and health promotion is about stakeholders' opinions..."

"...If we accept that all evidence starts with researchers' opinion and stakeholders' opinions count as evidence."

The evidence on evidence (concluded)

the only "data" that matters in engaging peoples' participation and activity sustainability beyond the funding?

community leaders' opinions!

Engaging community groups in planning...

Don't confuse bureaucratic consultation with building strategic partnerships

1. "Talk to us when you have something really important to say"
2. "Ask when you have a question only we can answer."
3. "Tell us how our answer changes your thinking." (Laberge & Edwards, 1994)

A question to which you know the answers!

- *Buzz groups*:
- Identify 3 or more of the most important determinants of health for your community
- (People from the health sector, give the others a chance...)

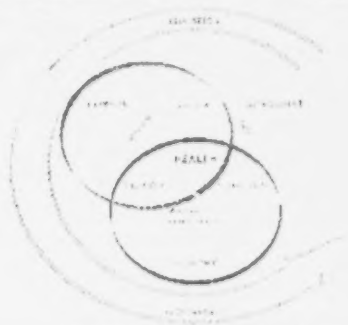
What Determines Health: the Official List

- Income and social status
- Social support networks
- Education
- Employment & working conditions
- Social environments
- Physical environments
- Personal health practices & coping
- Healthy child development
- Biology & genetic endowment
- Health services
- Gender
- Culture

How Does this Compare with What Matters to Communities?

1. Health programs
2. Clean environment
3. Public education (schools/colleges/universities)
4. Secure employment
5. Low poverty rates
6. Social programs
7. Low unemployment rates
8. Low crime rates
9. Economic growth
10. Welfare programs
11. Housing programs
12. Non profit and voluntary programs/Governments (tied) childcare/day-care programs
13. Parks and recreational facilities
14. Cultural diversity

Source: CHNV Meeting, 2000



Hancock, Labonte and Edwards, 2000

Indicators can be powerful

What we measure:

- reflects what we value as a society;
- determines what makes it onto the policy agenda;
- influences behaviour (remember how nervous you were to get a report card?)

A good set of indicators can help communities:

- foster common vision and purpose;
- identify strengths and weaknesses;
- change public behaviour;
- hold leaders accountable at election time initiate actions to promote wellbeing

Criteria for Indicator Selection

face validity	*they make sense to people*
theoretical validity	*they measure an important health determinant or an important dimension of health (or QoL)*
social validity	*they measure things that people care about*
valency	*they are powerful, they carry social and political punch*

Indicator Overlaps

(Franklish *et al* 2002)

- Surveyed 117 community indicator projects, 37 Canadian
- Of Canadian, 32% QoL, 30% population health (Healthy Communities), 22% environmental sustainability
- Used Hancock *et al* model as base
- Substantial overlaps/similarities
- Face validity?

Indicator Overlaps

(Franklish *et al* 2002)

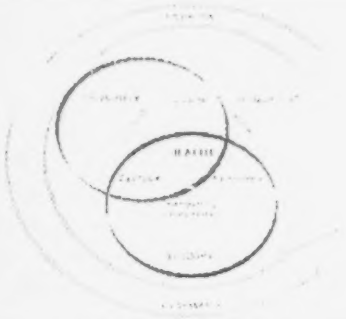
Category	% of indicator projects reporting use of category
Health	55%
Community	55%
Prosperity	60%
Equity	68%
Education	81%
Viability	78%
Sustainability	73%
Negative Issues	68%
Mortality	58%
Governance	62%
Health Behaviours	60%
Positive Health/Quality of Life	43%
Mastery/Self-Esteem/Coherence	4%

Community

spatial (city, town, neighbourhood, region) and non-spatial (interest, affinity)

for indicators, spatial communities more important
political jurisdiction, hence actions possible
existing data sets

within spatial, multiple affinity communities
participation to indicator selection essential for normative agreements (values) and indicator use (relevance)



Hancock, Labonte and Edwards, 2000

population health **determinants (inputs)**:

sustainable ecosystems
environmental viability
livable built environments
community convivility
social equity
economic adequacy

population health **change processes**:

education
governance

population health **outcomes (outputs)**:

positive health (quality of life)
negative health (disability/morbidity/mortality/function)

Indicators point towards valued social objectives...

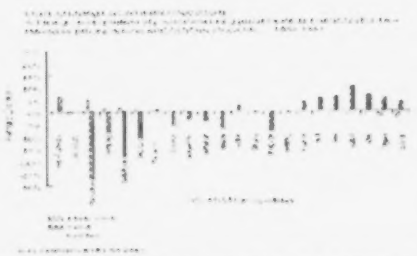
- Population health
- Livelihood
- Security
- Safety (reduced crime)
- Equity (reduced gap in all domains, rich and poor)
- Air quality
- Water quality
- Educational attainment (Source: CMY, 2004)

Population Health (outcome)

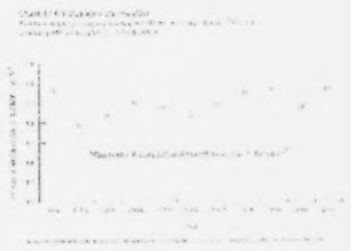
- Self-rated health, quality of life, life satisfaction, happiness
- Life expectancy at birth/different ages
- Functional ability
- Key M&Ms (cancer, CVD, asthma, diabetes, depression, AIDS, obesity)
- Smoking rates
- *Equity stratifiers!*

Population Health (input)

- Sustainability
  - Ecological footprint
  - Freshwater quality
  - Greenhouse gas emissions
- Viability
  - Air quality (ground level ozone)
  - Toxic waste/capita
  - Wetland and forested area
- *Equity stratifiers!*



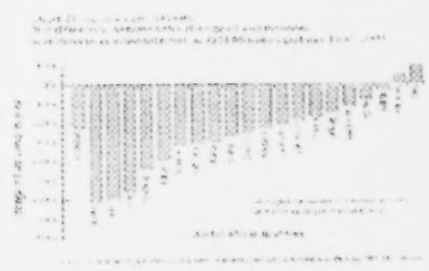
Reliance on cars declined marginally, but auto usage up in 11 of 20 communities; walking and cycling down in 14 of 20 communities.



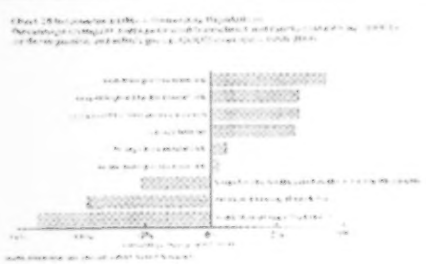
Ozone back on the rise

Population Health (input)

- Livability
  - Participation in cultural/arts activities
  - Affordable housing (homelessness/crowding)
  - Safety & security (rates/perceptions)
- Conviviality
  - Social support (density, quality)
  - Social inclusion (various measures)
  - Access and quality of public services
- *Equity stratifiers!*



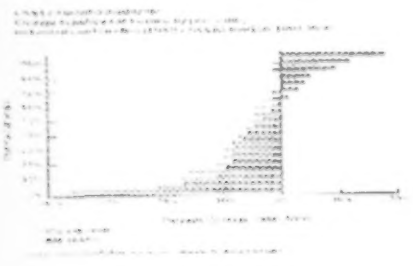
And where will the excluded live, as the rich flock to real estate as a safe investment?
(Watch out, Winnipeg and Quebec City!)



Social inclusion/exclusion: some progress, much regression

Population Health (input)

- Equity
  - Gini coefficients, income/wealth (market/non-market)
  - Women/visible minorities in positions of authority
  - Poverty rates (especially children)
- Prosperity/sufficiency
  - Employment rate (quality of work)
  - Economic diversity (various measures)
  - Foodbanks/hunger
- *Equity stratifiers!*



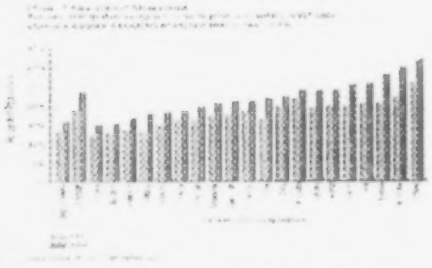
10 years of market gains, only partly buffered by income transfers and social programs

As Canadian rich grow richer, our assistance to the poor falls further behind

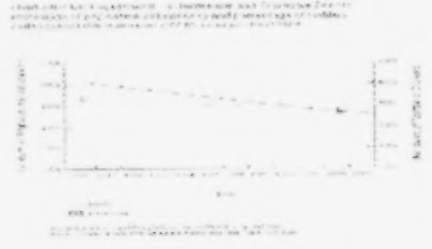
No real improvement over time, youth rate lower

Population Health (processes)

- Education
  - Early childhood education
  - Adult literacy skills
  - Education level completion rates
- Governance
  - Voluntarism rates (presently in decline)
  - Civic index or other measure of participatory democracy
  - Voter turnout
- *Equity stratifiers!*



Recall employment rate: more educated, but same employment rate. How many educated workers does 21st century global capitalism need?



As taxes for wealthy donors has declined, so has the % of taxfilers making donations.

Our global obligations…

- Right to health vs. free trade
- Ratification of human rights/environmental accords
- Aid (untied, 0.7% GDP)
- Debt cancellation
- Global public goods (e.g. GFATM)
- Market access/'fair trade'
- Migration and 'brain drain'

Another *buzz group* (the last, I promise)

- Name 3 or more roles you or your agency can play to enhance community power in social planning so that the process is *equitable* and *sustainable*.

Five Roles in 'Empowering" Population Health/Social Planning

- Educator/watchdog
- Resource broker
- Community developer
- Partnership developer
- Advocate/catalyst

Source: Labonte, Jackson & Chirrey, 1998

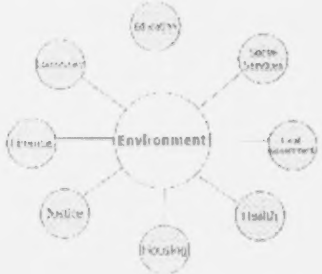
Partnerships can accomplish a lot of things:

better program decisions
better use of resources
better policy decisions

We hope!

Talking to Ecologists

- universal solvent and transport vehicles
- evaluating the health of riparians
- paleolimnological analyses of fluctuations



Being Clear on the Purpose for the Partnership

- a problem we can't fix on our own (we know this, others tell us)
- partners out there with enough overlap in values and attitudes towards the problem that we can work together
- partners out there with resources (skills, knowledge, material, financial) necessary to resolve the problem

So you want to stop a typhoid epidemic?

- improve wages and working conditions
- housing and agricultural cooperatives
- free education
- tax *nouveau riche* to support these initiatives
- strong, democratic local government, including suffrage for women
- local citizens' organizations to empower the poor in local government's decision-making

All diseases have two causes: One pathological, the other political.

Politics is nothing more than medicine (health) writ large.

Rudolf Virchow, 19th century "population" health activist

Indicators that Count! Measuring Population Health at the Community Level

Trevor Hancock, MB, BS,[1] Ron Labonte, PhD,[2] Rick Edwards, PhD[3]

ABSTRACT

We begin with a discussion of some vitally important conceptual and methodological issues. These issues concern our understanding of community, of health, of population health and its determinants, of the concept of 'measurement' and the values that underlie it, and our reasons for wishing to measure these constructs. We then present a framework for indicator categories, propose some criteria for indicator selection and suggest an initial set of core indicators. This indicator set reflects not simply health status – no matter how broadly defined – but also the environmental, social and economic determinants of health and the "healthfulness" of the community itself. Our most important conclusion is that if the information that is contained in the data of the indicator set is to be transformed into knowledge that can empower and emancipate the community, it has to be developed in consultation with the local community and local users of the information.

ABRÉGÉ

Nous débutons avec une discussion sur des questions conceptuelles et méthodologiques d'importance majeure. Ces questions touchent notre compréhension de la communauté, de la santé, de la santé de la population et de ses déterminants, du concept de « mesure » et des valeurs qui le sous-entendent, et et des raisons que nous avons de vouloir mesurer ces éléments. Nous présentons ensuite un cadre pour les catégories d'indicateurs, proposons quelques critères pour la sélection d'indicateurs et suggérons une première série d'indicateurs principaux. Cette série d'indicateurs reflète non seulement l'état de santé – peu importe la globalité de sa définition – mais aussi les déterminants environnementaux, sociaux et économiques sur la santé et la « salubrité » de la communauté en tant que tel. Notre conclusion la plus importante est que si l'information contenue dans les données de la série d'indicateurs doit être transformée en connaissances qui peuvent renforcer et émanciper la communauté, elle doit être développée en consultation avec la communauté locale et les utilisateurs locaux de l'information.

We begin with a discussion of some vitally important conceptual and methodological issues that underlie this topic. These issues have to do with our understanding of community, of health, of population health and its determinants, of the concept of 'measurement' and the values that underlie it, and our reasons for wishing to measure these constructs. We then present a framework for indicator categories, propose some criteria for indicator selection and suggest an initial set of core indicators.

Conceptual and methodological issues

A 'community' can be both spatial and non-spatial, but for the purposes of the development of community indicators we are concerned mainly with spatial communities, and particularly geo-political communities such as municipalities. Moreover, and particularly within the context of larger cities, we are interested in the spatial communities known as neighbourhoods, although their boundaries are not fixed and are as much psychological and social as they are physical.[1] This makes the development of indicators a complex process, but since such neighbourhoods often serve as the base for social and political action with respect to issues that affect the health, well-being, quality of life and environment of communities, it makes the development of indicators at this level important and worthwhile.

We take the view that health is much more than the measurement of death, disease and disability, it also encompasses mental and social well-being, quality of life, life satisfaction and happiness. Our ultimate goal as a society and as members of communities surely is to maximize human development and the achievement of full human potential. On the basis that "you get what you measure," we need ways to measure health and the quality of life – in its broadest meaning – at the community level; and, moreover, in ways that make sense to the community and not just to policy makers and academics.

A third important conceptual issue relates to the determinants of the health of a population. The determinants are very broad, and certainly include but go beyond the factors identified in the CIAR's population health models[2] – although the epidemiological evidence relating the broad range of determinants that are relevant to population health at the community level is not necessarily (yet) available. Broadly speaking, the determinants of the health of a *population* (as opposed to the determinants of the health of individuals) relate to meeting basic needs for all, achieving adequate levels of economic and social development, nurturing social relationships that are mutually supportive and respectful, and ensuring the quality and sustainability of the environment.

A fourth important issue is what is meant by "population health", particularly at the community level. We take the position that population health is much more than simply the aggregate of the health of

1. Health Promotion Consultant
2. Communitas Consulting
3. Jackson-Edwards Consultants

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the individual members of the population, important though that is. Population health also must include the distribution of health across a community (and thus, inevitably, must address issues of inequalities in health and inequitable access to the determinants of health). A further aspect of "population health" at the community level has to do with how well the community functions, whether the community *as a whole* is "healthy".

There is growing evidence that the well-being of the individuals in a community depends upon how well the community functions, not only in terms of ensuring equitable distribution of the determinants of health, but in terms of the processes of governance in the community such as the degree of participation, the degree of social cohesion and the extent of "civicness".[3,4] This reflects the definition of health promotion as "the process of enabling people to increase control over, and improve their health,"[5] where the process of empowerment and participation is seen as fundamental to good health. Measures of such attributes of a well-functioning community should also be a component of an assessment of population health at the community level.

Thus the key elements of an assessment of population health at the community level include:

- the aggregate of individual death, disease, disability, behavioural and positive health status (population health outputs)
- the pattern of distribution of such status across the community – inequalities in death, disease, disability, behavioural and positive health status (inequalities of outcomes)
- key indicators of environmental, social and economic determinants of health (population health inputs)
- the distribution of such determinants across the community – inequalities in access to the determinants of health (inequalities of opportunity)
- the healthfulness of the community's processes of governance (participation, social cohesion, civicness, etc.) – inequitable distribution of power, participation, etc.

Measurement of the health of a population is far from simple, for a variety of reasons. To begin with, measurement, curiously enough, is not an exact science. What we choose to measure, how we choose to measure it and the significance we attach to the results have more to do with philosophy, values and politics than with science – or more precisely, perhaps, science is a reflection of our philosophy, values and politics and not a neutral and objective practice that exists outside of these frameworks. The understanding of what constitutes "evidence" thus varies from scientist to politician to citizen. The process of measurement is further complicated because we are dealing with perceptions of health and its determinants as much as with 'objective reality' – and both are valid in their own way.

The very act of measurement implies some sort of assessment, and certainly, if repeated, assumes the measurement of change – either for better or for worse. Most indicator projects are undertaken in order to track change, to measure progress. But this in turn implies that we have a sense of what it is that we are progressing towards, that there is a "good" out there that the community and/or the society – or some segment of it – considers desirable. In the absence of such goals, assessment of change becomes relatively meaningless, since we have no way of judging whether such change is beneficial or harmful.

What indicators represent, in their purest form, is *data*,* and in such a form it is chiefly of interest to researchers. When that data is analyzed and interpreted, it becomes *information*, which is of value to policy makers, program managers and other decision makers. When that information is translated into a form that is useful to the community – and even more important, when the definition of the information to be collected, as well as the analysis and interpretation, is in the hands of the community – that information becomes useful *knowledge*, and the process of acquiring and using that knowledge helps to empower the community. Finally, it is to be hoped that the distillation of that data, information and knowledge will result in wise choices and the "right use" of knowledge. Ultimately then, indicators should contribute to our *wisdom* and to our ability to make the right choices – not just for ourselves but for generations as yet unborn.

The final issue is whether knowledge has an impact. What sort of information influences policy makers, interests the media and empowers the community? Understanding these issues is crucial if indicators are to count, if measurement is actually going to matter. Yet Starr[6] suggests that the effects of official statistics on decision making and on society as a whole "are so diffuse and illusive that valid generalizations may be few." In particular, he points out that just because data or information is cited in a decision-making process does not mean that it caused that decision, which may have been made for other reasons – "use never proves effect." Or as Innes[7] so succinctly puts it:

"When it really comes down to it, there is not much that can be said with confidence about how knowledge influences policy."

A framework for indicators

The key conceptual issue in indicator development is the framework that is used to organize the components. Of course, all models are wrong, in that they present a necessarily simplified version of reality. Nonetheless, they also represent a perspective on reality that discloses the values and concepts of those who propose them.

The basic framework that we have chosen to use (Figure 1) is one that has been

* Innes (1990) presents definitions of the key terms used here, based on Webster's *New Collegiate Dictionary* (8th edition, 1977) as follows:
  - data is "factual information (as measurements for statistics) used as a basis for reasoning, discussion or calculation." In other words, notes Innes, "data have no meaning in themselves, but only in relation to the context of argument, where the arguer assigns them meaning."
  - Innes considers information to be "a higher order concept: ...information is data organized to have a meaning and a purpose, which may be to change ideas or actions."
  - Innes considers knowledge to be an even higher-order concept, defined by Webster's as "the fact or condition of knowing something with familiarity gained through experience or association" and "the sum of what is known." For Innes, knowledge includes but goes beyond "the specific quality of information to an understanding of a whole ensemble of data, information, and experience."
  - *Chambers Twentieth Century Dictionary* (1972) defines wisdom as the "ability to make right use of knowledge."

TABLE I
Indicator Categories

A: DETERMINANTS

Sustainability
- Energy use
- Water consumption
- Renewable resource consumption
- Waste production and reduction
- Local production
- Land use
- Ecosystem health

Viability
- Air quality
- Water quality
- Toxics production and use
- Soil contamination
- Food chain contamination

Livability
- Housing
- Density
- Community safety and security
- Transportation
- Walkability
- Green/open space
- Smoke-free space
- Noise pollution

Conviviality
- Family safety and security
- Sense of neighbourhood
- Social support networks
- Charitable donations
- Public services
- Demographics

Equity
- Economic disparity
- Housing affordability
- Discrimination and exclusion
- Access to power

Prosperity
- A diverse economy
- Local control
- Employment/unemployment
- Quality of employment
- Traditional economic indicators

B: PROCESSES

Education
- Early childhood development
- Education/school quality
- Adult literacy
- Lifelong learning

Governance
- Voluntarism/associational life
- Citizen action
- Human and civil rights
- Voter turnout
- Perception of government leaders and services
- Healthy public policy

C: HEALTH STATUS

Quality of life
- Well-being
- Life satisfaction
- Happiness

Mastery/Self-esteem/Coherence

Health-promoting behaviours

Disability/Morbidity
- Stress/anxiety
- Other morbidity/disability measures
- Health utility index

Mortality
- Overall mortality rate
- Infant mortality rate
- Suicide rate

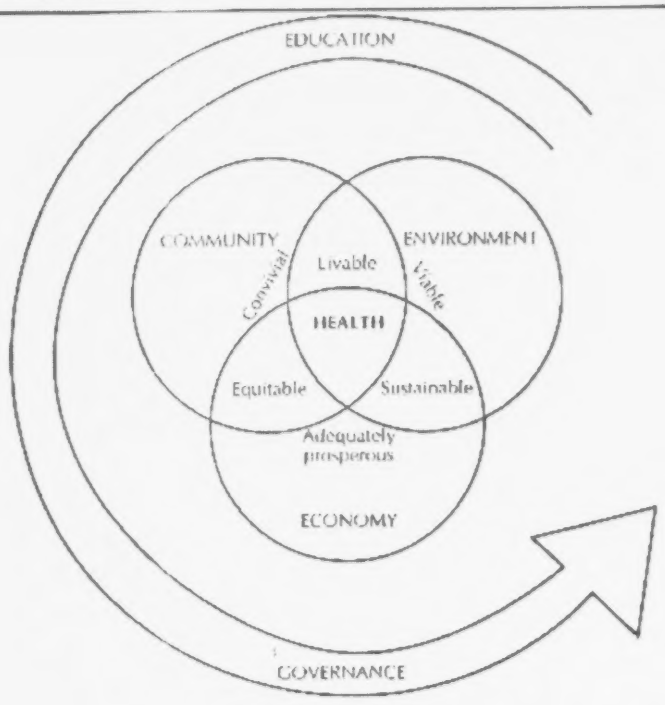

Figure 1. Basic framework for indicators.

developed and tested over a number of years;[8] has proven itself to be empirically useful and conceptually strong, and has been used in official reports (e.g., Royal Commission on the Future of the Toronto Waterfront, 1992) and by a number of other authors. The basic framework links what have been described as the elements of the 'three-legged stool' of community sustainability and well-being (community, environment and economy) while paying attention to the links between these three spheres. It also focuses attention on the desired outcome, health. Furthermore, if health is interpreted broadly as human development and community is understood more broadly as society, the model also serves to integrate the "four capitals" – human, social, ecological and economic – that are at the root of the growing interest in alternative economics measures[9,10] and which are sometimes used in Canada as an organizing structure for community-level quality of life indicators (e.g., Edmonton Social Planning Council's LIFE – or Local Indicators For Excellence – project).

However, the model as originally developed does not adequately represent several important dimensions of community health and well-being. Specifically, education – a key driver of human development – is not in the model, nor are various aspects of governance. Accordingly, we have added another dimension to the model, which we refer to as the "processes of change." The two key "drivers" of this process are education and governance.

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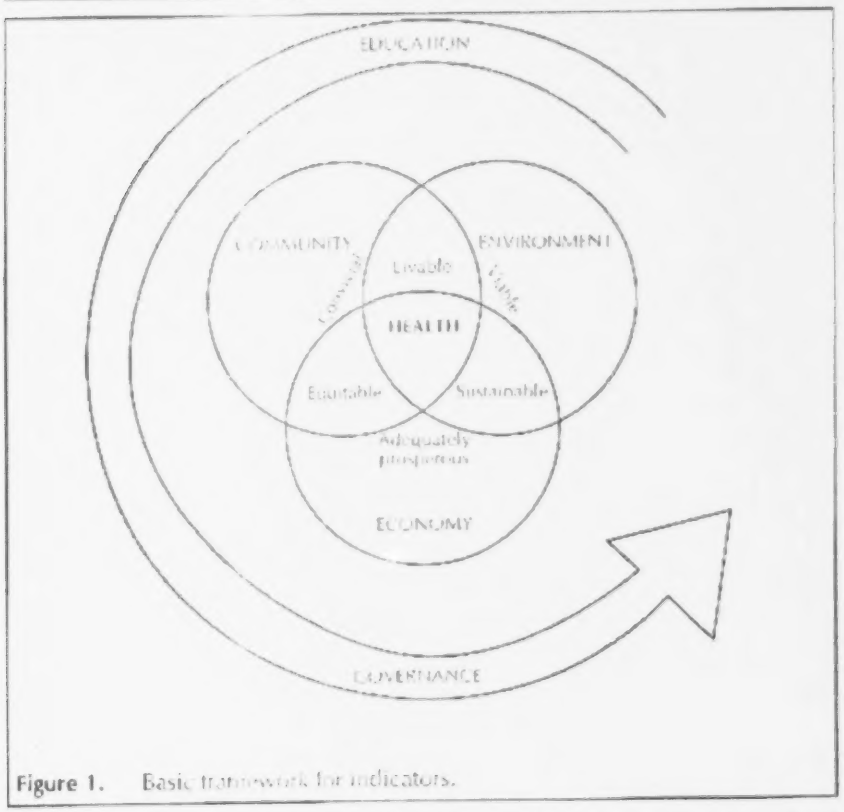

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which in turn encompasses communication, participation, empowerment, civil rights and government performance. These elements, when in place and working well, independently enhance human health, as well as increase the likelihood that individual, community and political decisions in the three spheres, and their links, will result in the outcome of improved health.

The indicator categories that emerge from this model are congruent with the categories used in a wide variety of community indicator projects that are focussed on health status, healthy communities, 'state of the environment reporting', community sustainability and quality of life issues (and are reviewed in some detail in the full report).

We thus suggest 10 categories of indicators arranged in 3 sets, as follows:

1. The six key determinants (inputs)
   - environmental quality/ecosystem health
   - economic activity
   - social cohesion/civicness
   - equity (including power)
   - sustainability
   - livability
2. The process by which all this is achieved
   - education
   - participation, empowerment and civil rights
   - government performance
3. The outcome – health status

Each of these 10 categories in turn has a number of sub-categories, yielding a total of 58 indicator sub-categories (see Table I). From these sub-categories, a core set of indicators is suggested (see full report).

This set of indicators is broadly consistent with and reflective of other proposed community-level indicator sets, in particular the set identified in a CMHC/Environment Canada report on sustainable community indicators software[13] which, in turn, was based on the Environment Canada "State of the Environment Report" framework and CMHC's "Community Oriented Model of the Lived Environment" (COMLE) indicator sets.

Criteria for indicator selection

The following considerations have directed our selection of indicators. We also believe that such considerations are important in guiding communities in their own selection of indicators.

- Local involvement in selection of indicators: this helps to sustain action in the use of the indicators, to interpret their significance under conditions of inter-community comparisons and to ensure that indicators are consistent with key normative values, including some explicit statement of a preferred social and ecological future.
- Use of multi-stakeholder processes in their development: that is, the indicators are developed and overseen by people representing a variety of interests and knowledge.
- Ease of audience interpretation: the indicators both are, and measure, concepts that are easily understood, relevant and salient to the general public and others, and are within the "normal" range of policy makers' and the public's experiences, while still challenging this experience somewhat by the novelty of the information they represent.
- Measurement of conditions that are significant, comparable and amenable to direct citizen or indirect policy change: that is, the indicators address substantial problems, are useful in guiding action from the individual on up and have specific policy purposes in areas where there is already a public commitment to action.
- Disaggregatable down to at least the geopolitically defined community level and broadly representative of the area or condition: that is, they "should not reflect the problem from the perspective of only a relatively narrow aspect or population group."[12]

To conclude, we return to the key theme of our report – indicators are only useful if the process of developing and using them engages the community as a whole in examining what it wants to be, where it wants to go and what its values are; if the process provides useful and usable information to the community; and if the process increases the community's knowledge and power. The development of indicators should be looked upon as an opportunity for increasing public and political education and awareness as to health and its determinants, and for exploring ways of creating healthier, more sustainable, more equitable, safer, more livable and prosperous communities.

While there is some merit to the development of a reasonably standard set of core indicators that can be used for comparison purposes nationally and even internationally, it is more important that the community select measures that matter if indicators are to count (have an impact) in the life of the community. It is also important to stress yet again that our focus is on the use of indicators by local citizens, community organizations and agencies and local governments, rather than national and/or provincial policy makers or researchers, except to the extent that policy development and research facilitates the development and use of indicators at the community level.

Next steps

We believe that the most effective strategy for the federal government – and particularly Health Canada – to pursue is to build upon and further expand the indicators process that is currently being developed by CMHC and Environment Canada. This model allows for the development of scientifically valid, broad-based indicator sets in a process of consultation with some of the key users (municipal politicians and staff) and yet delivers a product that, while providing a nationally standardized set of indicators, also provides both an educational program for users (including the community) and considerable flexibility in tailoring the indicator set to local needs. Accordingly, Health Canada should become a partner with CMHC and Environment Canada in the further development of this indicator software package.

In addition, Health Canada should work closely with other national, provincial and community-level indicator projects, including those identified in our report, to ensure that there is better linkage among these various projects, and to avoid overburdening communities with multiple, overlapping and uncoordinated indicator projects. Finally, Health Canada should utilize its (currently rather tenuous) links to the Healthy Communities networks in

Quebec, Ontario, BC and other provinces, so as to engage them and to benefit from their considerable experience in indicators development.

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1. Sawicki D, Flynn P. Neighborhood indicators: A review of the literature and an assessment of conceptual and methodological issues. *J Am Planning Assoc* 1996;62(2):165-83.
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9. Ekins P, Hillman M, Hutchinson R. *Wealth Beyond Measure: An Atlas of New Economics*. London: Gaia Books, 1992.
10. World Bank. *Monitoring Environmental Progress (MEP): A Report on Work in Progress*. Washington, DC: World Bank, 1995.
11. CMHC/Environment Canada. Sustainable Community Indicators Software Report. Ottawa: CMHC/Environment Canada, 1997.
12. U.S. Department of Health and Human Services. Healthy People 2010: Draft Objective. Washington, DC: US Public Health Service, 1998.

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Social Planning Models in Rural Australia

Prof Daniela Stehlik
Alcoa Research Centre for Stronger Communities
Curtin University of Technology
Perth

Dr Lesley Chenoweth
School of Social Work & Applied Human Sciences
The University of Queensland
Brisbane

Overview

- Who we are
- Background to communities in rural Australia
- An Integrative Model for Community Building
- Case Studies
- Questions & Comments

Who we are & our work together

- Have worked together for 10 years
- Queensland & New South Wales
- Understanding communities undergoing change
- Perspective of the community practitioner
- Published in a range of areas

Australia has 3 tiers of government

Highly coastal population

Large rural & remote areas with small population

WA & Qld

Regionalised

Remote and isolated communities

CD in practice

- The role of the practitioner
- Capacity building doesn't just 'happen'
- What are the challenges?

  Building a 21st century model of human service practice

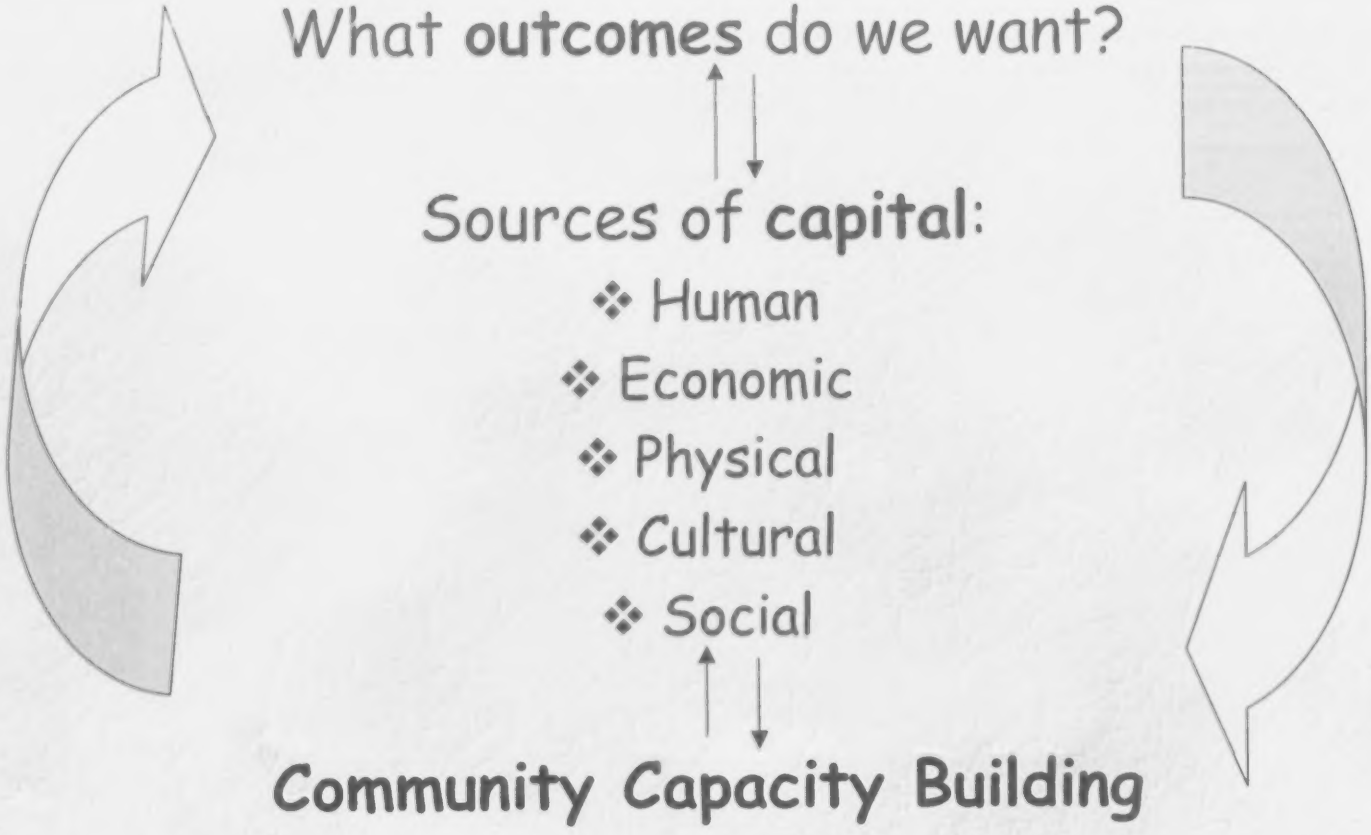
Key Issues in Rural communities in Australia

- Climate change - drought
- Water
- Changing economic profiles
- Infrastructure decline
- Indigenous communities
- Young people - education, employment & suicide

Responses include..

- Joined up government
- Sponge cities
- Place management
- Leadership training (Positive Rural Futures)
- Community Business Partnerships

An Integrative Model for Community Building



An Integrative Model for Community Building

Systems: Social, economic and environmental - the triple bottom line

People: Individuals, families, communities, regions

Sectors: government, NGOs, business, human services, private for profit

An Integrative Model for Community Building

What is Community Capacity Building?

- Sense of community
- Commitment
- Ability to solve problems
- Access to resources (Chaskin et al, 2001)
- Practitioner role crucial

Case Studies

- Place Management
- Corporate Social Responsibility
- Charismatic Leader Models

- Local Area Coordination
- Community Capacity Builders WA
- Natural Resource Management Coordination

Local Area Coordination Qld

- Planning commences 1999
- Community development a core practice
- LACs appointed and trained early 2000
- 6 sites - all outside metropolitan area
- 'tough' sites chosen

Pilot LAC Qld. - framework

- Alternative eligibility criteria
- Managed centrally
- Steering committee
- Discretionary funding
- Training/professional practice

Strengths

- Early intervention
- Evidence based practice
- Local solutions to local issues
- Moving towards informal supports
- Modelling best practice
  - Developing local resources
  - Developing leadership potential
  - Promoting inclusion

Challenges

- Building community takes time
- Practitioner appointment - who?
- Let's not homogenise - again ...
- Impact of change on other players
- How many clients?

Case Studies

- Place Management
- Corporate Social Responsibility
- Charismatic Leader Models

- Local Area Coordination
- Community Capacity Builders WA
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Formative Evaluation as Community Capacity Building

- Evaluations as integral part of programs
- Formative evaluation offers opportunities for community building
- Involves the practitioner AND other stakeholders

Outline of presentation

- **Key Learnings**
- **Program Context**
- **Formative Evaluation Philosophy**
- **Evaluation Dimensions**
- **Methods adopted**
- **Strengths & Challenges**

Key Learnings -Building Communities through Evaluation

- **Spatial** communities
- **Practice** communities
- **Human service** communities

Program Context

- **Rural/remote**
- **People with disabilities and their families**
- **Government staffed and funded**
- **Pilots**
- **Quest for better service delivery models**

Formative Evaluation
Philosophy Framework

- Social Justice
- Participatory
- Action research principles
- Ethical practice

Formative Evaluation

Philosophy Framework - how?

- Evaluation as staff development
- Through Stakeholder Reference Group
- Involved in professional development activities
- Confidentiality/anonymity

Evaluation dimensions

- **Complexities**
- **Multi-level interventions**
- **Cultural change agenda**
- **Searching for 'best practice'**
- **Pressure to get evidence 'out'**
- **Rural/remote**
- **Spectrum of disability service availability**

What were the indicators used?

- **From Program goals**
  - **At the level of …**

What were the indicators used?

- From Program goals
  - At the level of …

- **Government Policy**
- **Dept'l Program management**
- **Field Practice**
- **People with a disability and their families**
- **Community capacity building**

What were the indicators used?

- From Program goals
  - At the level of …

- **Government Policy (4)**
- **Dept'l Program management (3)**
- **Field Practice (6)**
- **People with a disability and their families (5)**
- **Community capacity building (7)**

22 levels ….

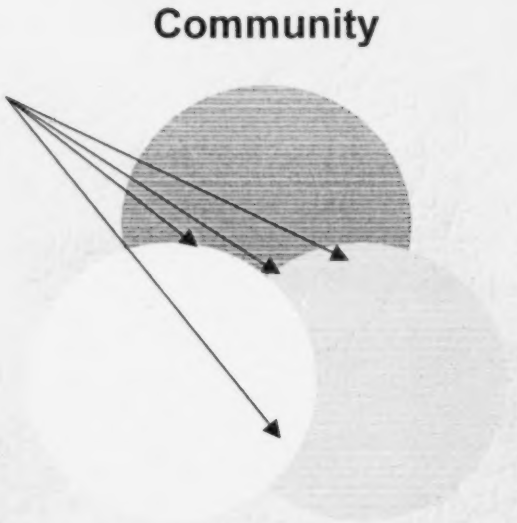
Methods adopted ....

- **Focus groups**
- **Questionnaires**
- **Indepth interviews**
- **Measurement of social relationships**
- **Participant observation**
- **Client records analysis**
- **Practioner as researcher**

Evaluation dimensions

- Complexities
- **Multi-level interventions**
- Cultural change agenda
- Searching for 'best practice'
- Pressure to get evidence 'out'
- Rural/remote
- Spectrum of disability service availability

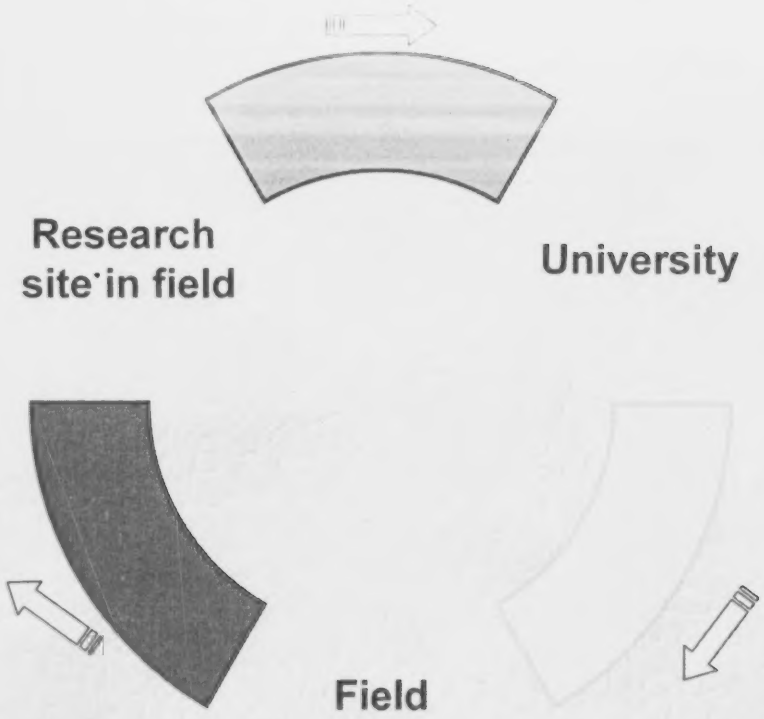
Program addressed each level and the interactions between



Key Learnings -Building Communities through Evaluation

- Spatial communities
  - Worker/families/ngos/govt etc.
- **Practice communities**
  - **Workers/ngos/govt/academe**
- Human service communities
  - govt./ngos/academe

Building the Practice Community



Researcher-practitioners exchange >> new knowledge
New knowledge informs training of new practitioners
New practitioners implement new knowledge

restating:

- The role of the practitioner
- Capacity building doesn't just 'happen'
- Facilitation & Intervention are required

  Building a 21st century model of human service practice

Strengths of Evaluation

- **Accommodated complexity**
- **Provided both quantifiable and illustrative evidence**
- **Gave value beyond the evaluation per se**
- **Enabled participation including people with a disability**

- Built practitioner confidence
- Enhanced program profile within dept.
- Worked in longitudinal and short term situations
- Enabled timely feedback of findings
- Aided writing of report

- **Assumed high level evaluator knowledge of program, practice & issues**
- **Political sensitivity**
- **Distance across sites limited participant observation**
- **Demand for face to face contact**
- **Problematic access to client databases & records**

Further readings:

- Chenoweth, L. & Stehlik, D. (2003) The implications of social capital for the inclusion
- of people with disabilities and families in community life.
- *Journal of International Inclusive Education*

- Chenoweth, L. & Stehlik, D. (2002) Using technology in rural practice –
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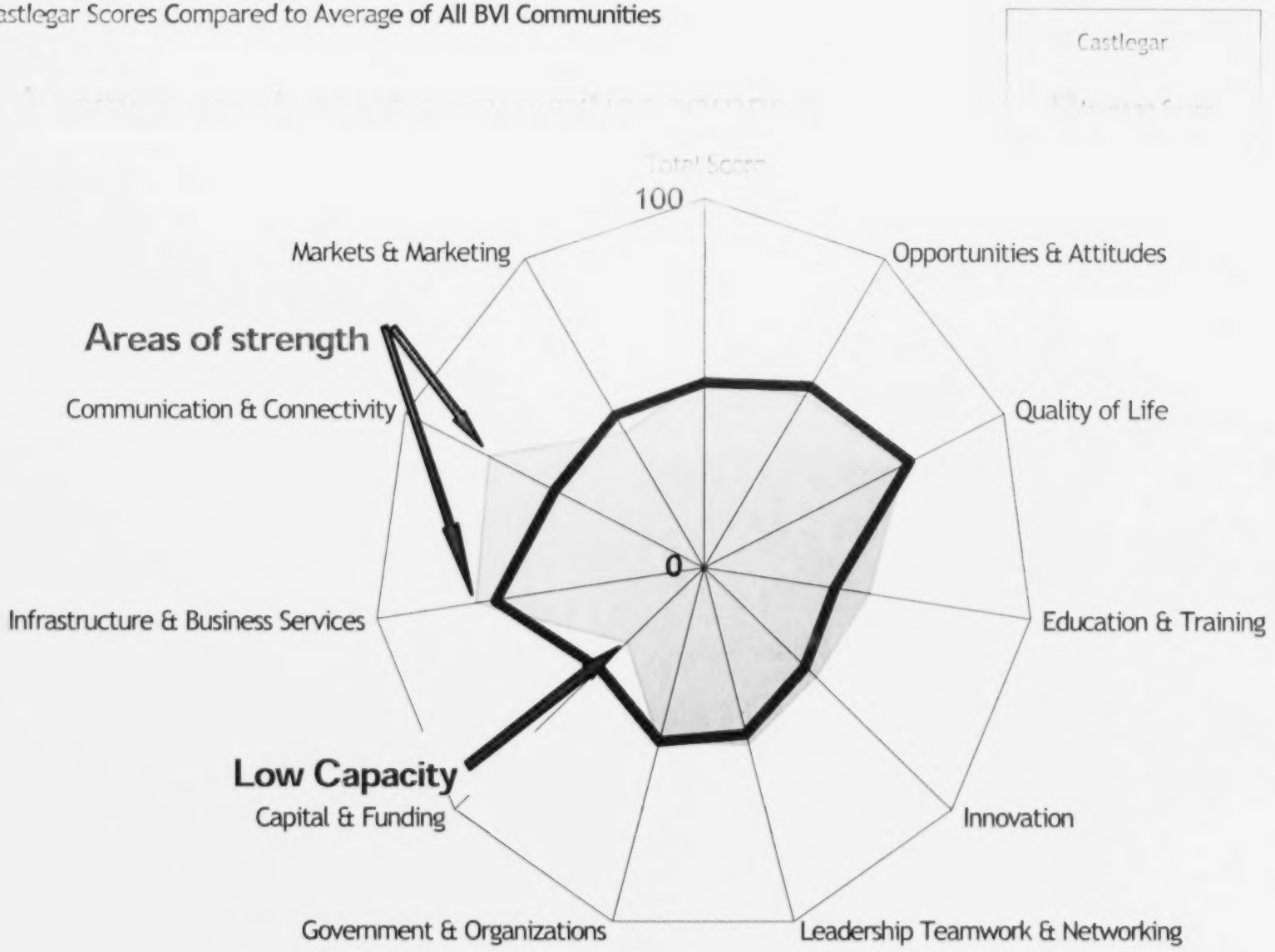
Perceptual Indicators

Columbia Basin Trust

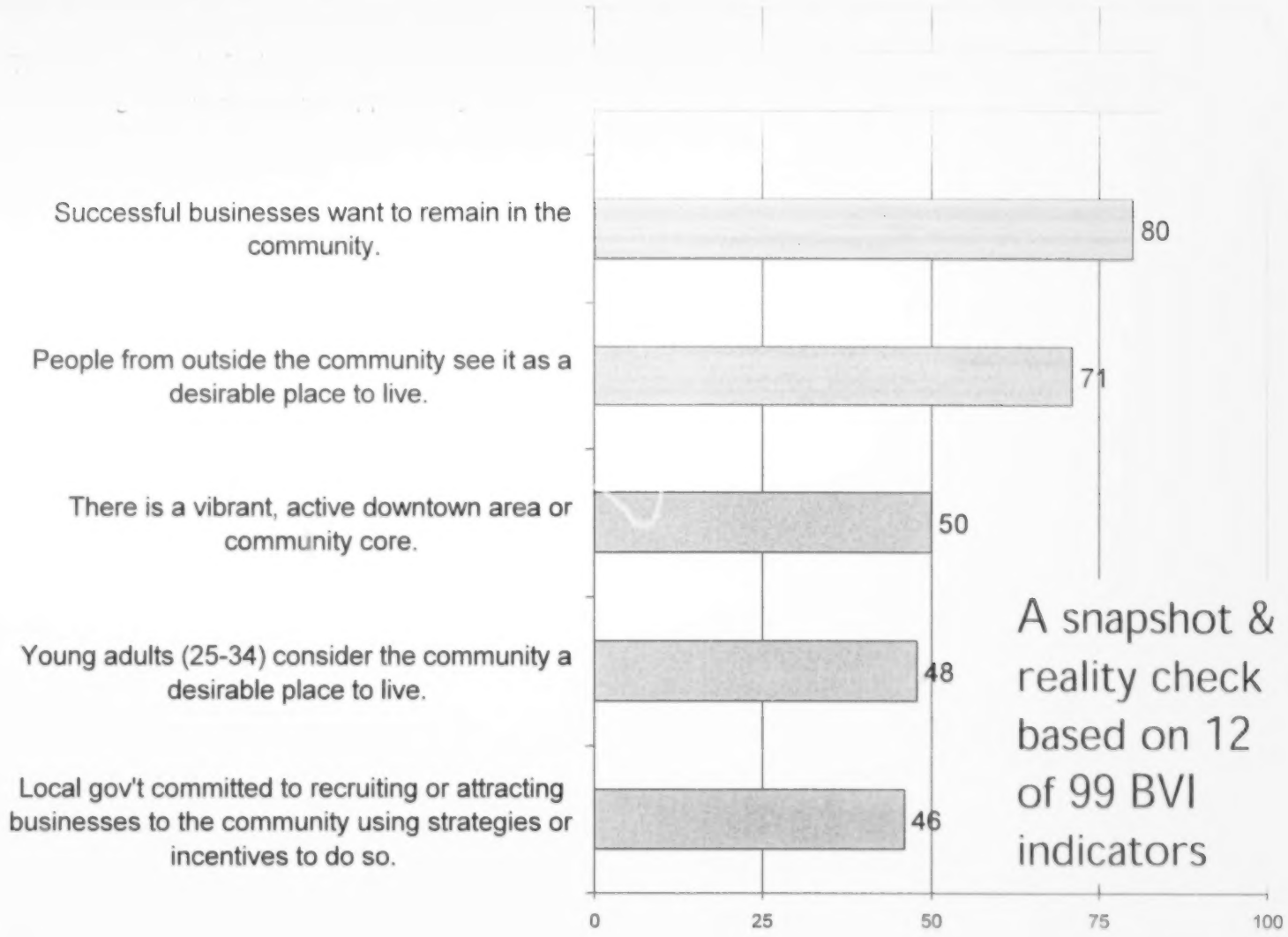
Community Planning Symposium – May 10-11, 2004

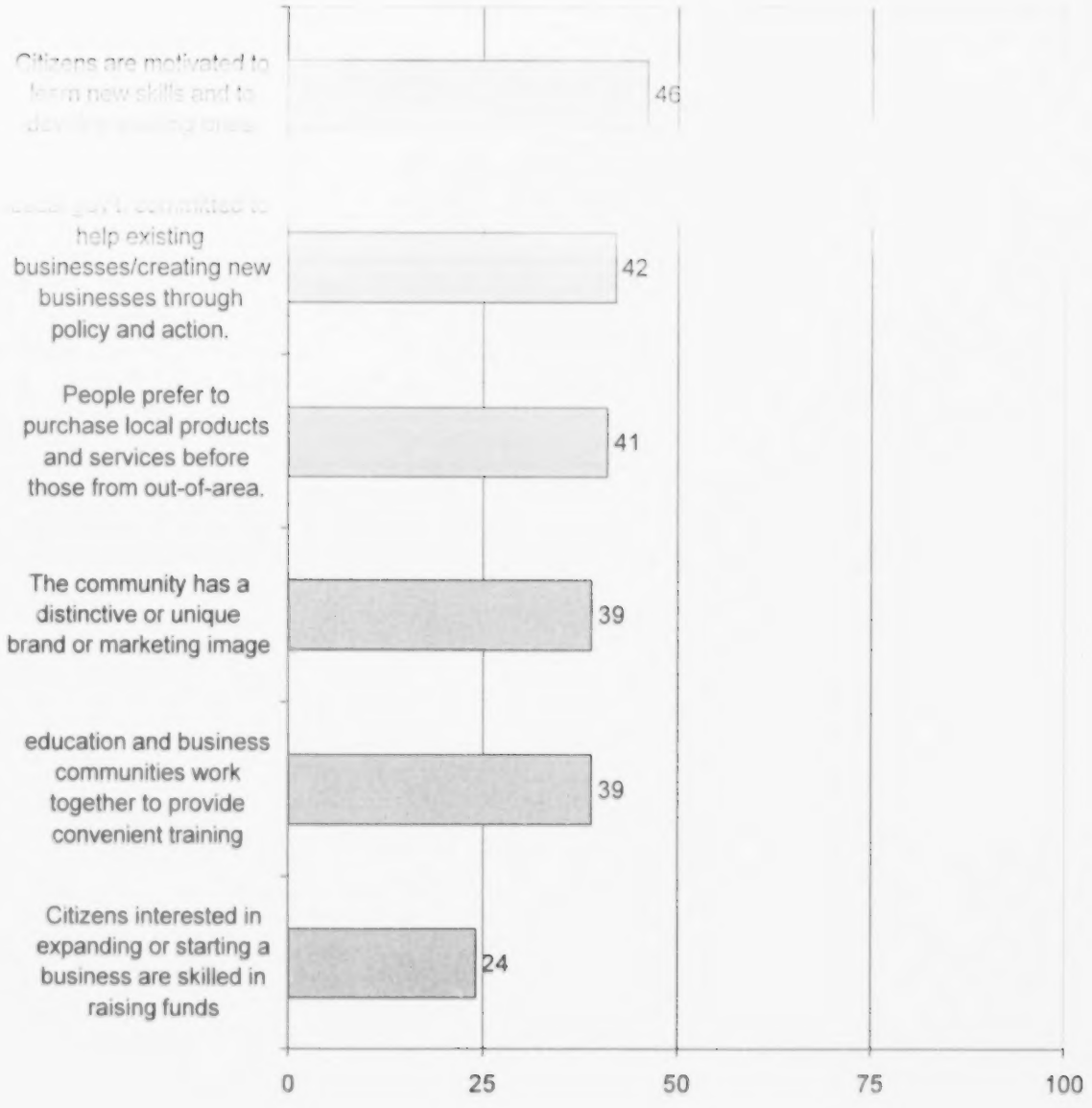
Mike Stolte

Castlegar Scores Compared to Average of All BVI Communities



Gut Check 12 - **Non-traditional Indicators**


Successful businesses want to remain in the community.
80
People from outside the community see it as a desirable place to live.
71
There is a vibrant, active downtown area or community core.
50
Young adults (25-34) consider the community a desirable place to live.
48
Local gov't committed to recruiting or attracting businesses to the community using strategies or incentives to do so.
46
0
25
50
75
100
A snapshot & reality check based on 12 of 99 BVI indicators


Citizens are motivated to
46
help existing businesses/creating new businesses through policy and action.
42
People prefer to purchase local products and services before those from out-of-area.
41
The community has a distinctive or unique brand or marketing image
39
education and business communities work together to provide convenient training
39
Citizens interested in expanding or starting a business are skilled in raising funds
24
0
25
50
75
100

- Allows community to take some control over economic destiny & build self-sufficiency
- Finds gaps and strengths & assets in an easy to read graphical format that can serve as a benchmark for the community
- Quantifies 99 indicators important for entrepreneurial stimulation
- Easily spots where there is significant diversity of opinion

- Allows community to build common understanding and set priorities for action (actions broken into short, medium, & long term)
- Brings business people, leaders and citizens together to build bridges and capacity
- Reality check on actions performed by community
- Assess Focus Act!

- For More Info, Summary or Full Report contact:

Mike Stolte or Terri MacDonald

mstolte@futures.bc.ca tmacdonald@futures.bc.ca

CFDC of Central Kootenay

1-800-661-1395 or 1-250-352-1933

- Or visit - www.BusinessVitalityIndex.com

How they See their Situation & Response

- The Anointed – Opportunity – Managing Growth
- The Miser – Neutral – Prosperity through Policing
- The Mobilized – Threat – Real action/Thinking shifted/ Catalytic community leaders
- The Traditionalist – Threat – Unable to mobilize, no history
- The Independent – Threat – Community can band together

What is BVI

- ✓ BVI is a tool designed to enhance *Community Entrepreneurship* by measuring a community's **business friendliness** relative to other communities

- ✓ Developed by Community Futures (CF) of Central Kootenay, the tool gathers **perceptions** from business people (50%), leaders (25%), & citizens (25%) on 99 key indicators

✓Compares & analyzes **data & perceptions**

✓Using findings, assists community in **setting priorities & taking action**

✓**Assess - Focus - Act**

Process

1) Meeting with Community Sponsor(s)
2) ASSESSMENT Meeting – businesspeople, community leaders, others
3) FOCUS Meeting – whole community
4) ACTION!

HARROP-PROCTER
BUSINESS & ARTISANS
ASSOCIATION

An avenue for joint marketing & more networking

An effective business lobby

A community brand

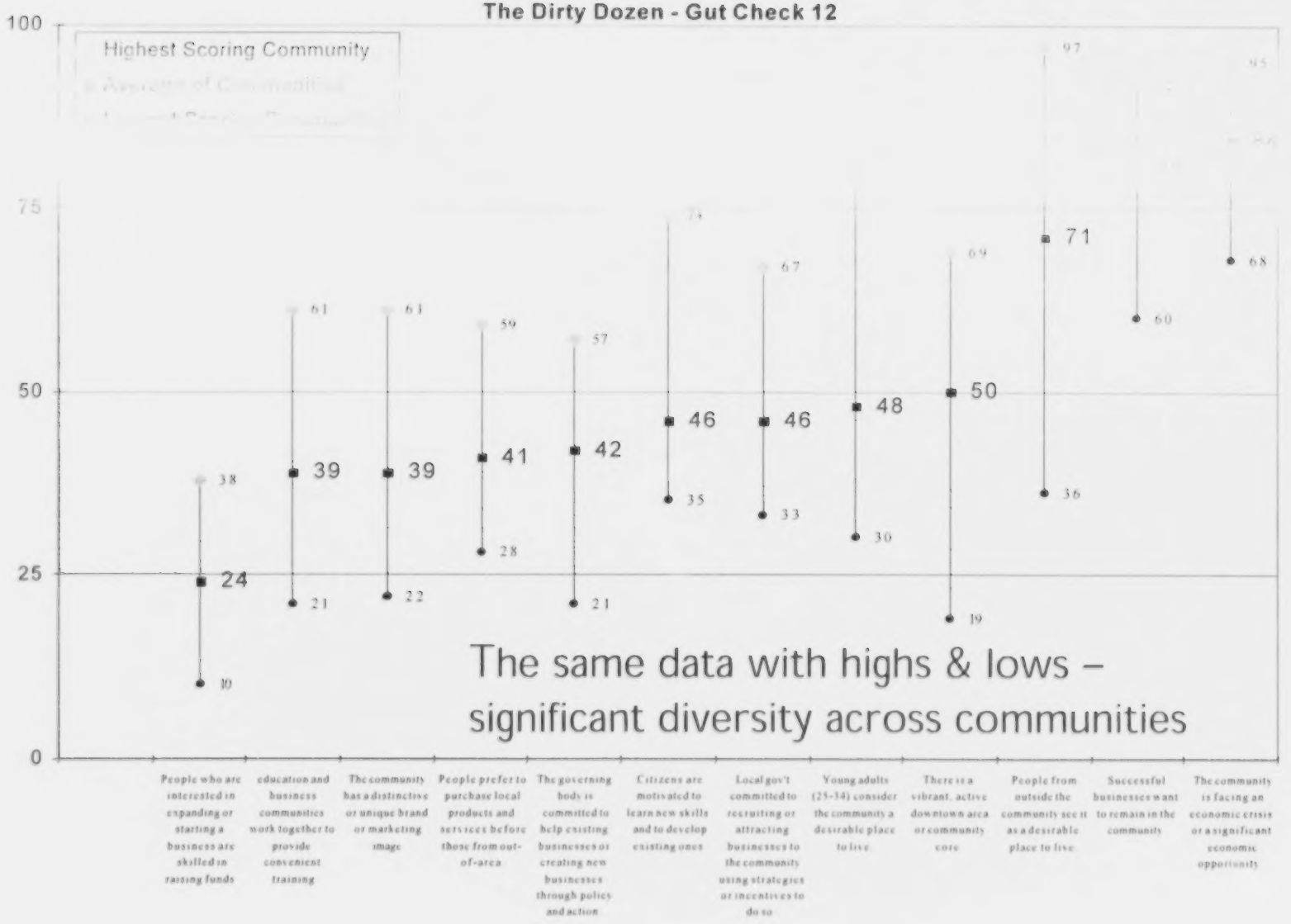
Sunday Money

Wood wizardry

Eco-friendly forestry project in Nelson gets a boost while helping to promote a Harry Potter novel

Provincial exposure & real sales

www.theciel.com


The Dirty Dozen - Gut Check 12
Highest Scoring Community
100
75
50
25
0
38
24
10
61
39
21
63
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22
59
41
28
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33
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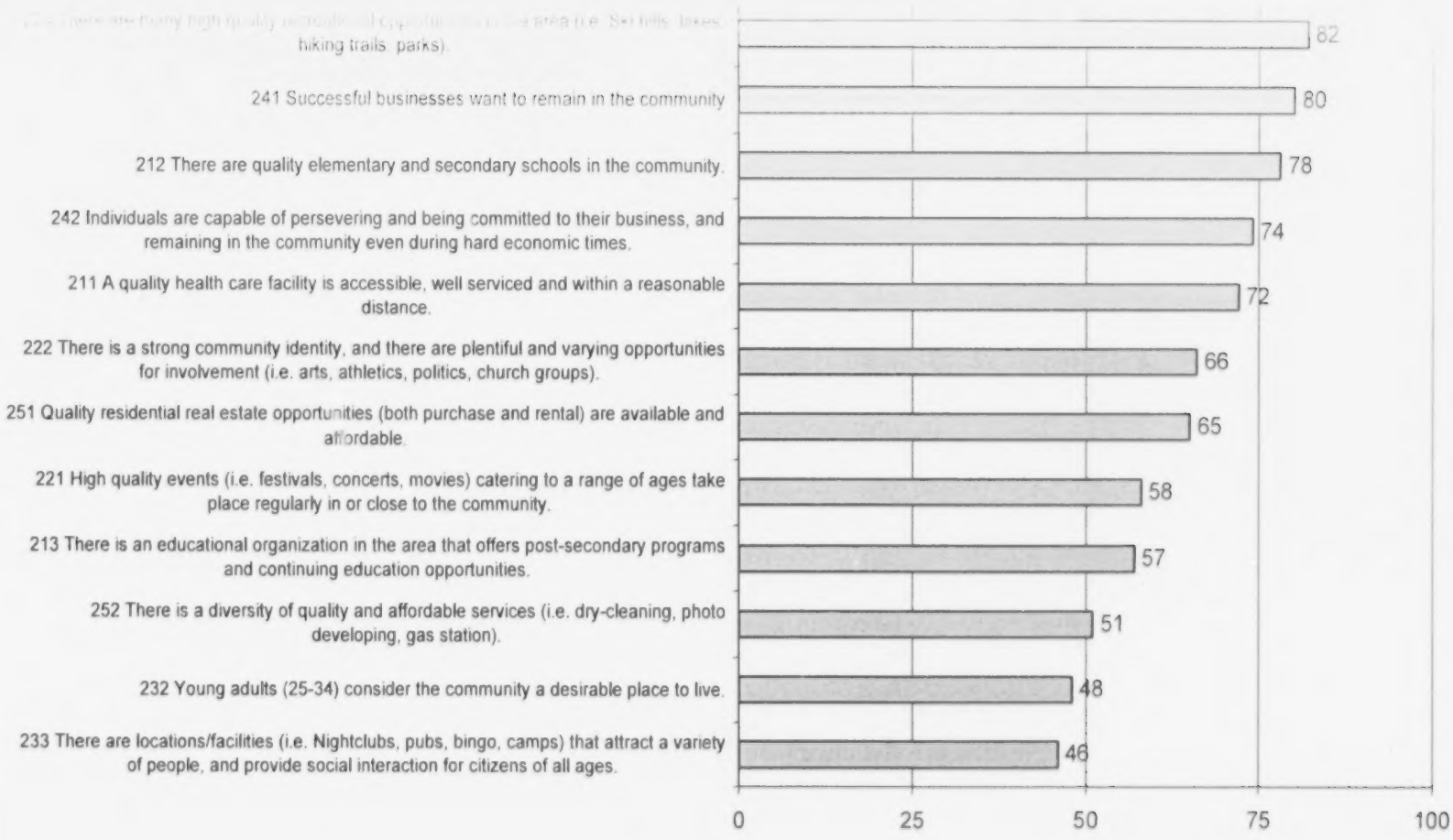
30
69
50
19
97
71
36
60
68
People who are interested in expanding or starting a business are skilled in raising funds
education and business communities work together to provide convenient training
The community has a distinctive or unique brand or marketing image
People prefer to purchase local products and services before those from out-of-area
The governing body is committed to help existing businesses or creating new businesses through policy and action
Citizens are motivated to learn new skills and to develop existing ones
Local gov't committed to recruiting or attracting businesses to the community using strategies or incentives to do so
Young adults (25-34) consider the community a desirable place to live
There is a vibrant, active downtown area or community core
People from outside the community see it as a desirable place to live
Successful businesses want to remain in the community
The community is facing an economic crisis or a significant economic opportunity

The same data with highs & lows – significant diversity across communities

Quality of Life (Mean Scores out of 100)


hiking trails, parks).
82
241 Successful businesses want to remain in the community
80
212 There are quality elementary and secondary schools in the community.
78
242 Individuals are capable of persevering and being committed to their business, and remaining in the community even during hard economic times.
74
211 A quality health care facility is accessible, well serviced and within a reasonable distance.
72
222 There is a strong community identity, and there are plentiful and varying opportunities for involvement (i.e. arts, athletics, politics, church groups).
66
251 Quality residential real estate opportunities (both purchase and rental) are available and affordable.
65
221 High quality events (i.e. festivals, concerts, movies) catering to a range of ages take place regularly in or close to the community.
58
213 There is an educational organization in the area that offers post-secondary programs and continuing education opportunities.
57
252 There is a diversity of quality and affordable services (i.e. dry-cleaning, photo developing, gas station).
51
232 Young adults (25-34) consider the community a desirable place to live.
48
233 There are locations/facilities (i.e. Nightclubs, pubs, bingo, camps) that attract a variety of people, and provide social interaction for citizens of all ages.
46
0
25
50
75
100

- Why is entrepreneurship important?
- What is the BVI?
- Context of the Report
- Key Findings
- Recommendations
- Q & A

Building

1. A community's ability to act collectively to take advantage of opportunities

2. Presence of a community environment that allows entrepreneurs to flourish.

Why is entrepreneurship important?

- The 21st Century has been dubbed **"The Entrepreneurial Age"** (Ernst & Young)/ 4 of 5 Influential Americans believe it will be defining trend of this Century

- **Powerful link** between entrepreneurship & economic performance

- Up to **60-80% of jobs created** in US in last decade created by entrepreneurs & small business

- ✓ **80-90%** of jobs created from **within** community

- ✓ Increasingly, research shows entrepreneurs fare better in **supportive communities** with dynamic business support organizations – communities have level of **control** & influence

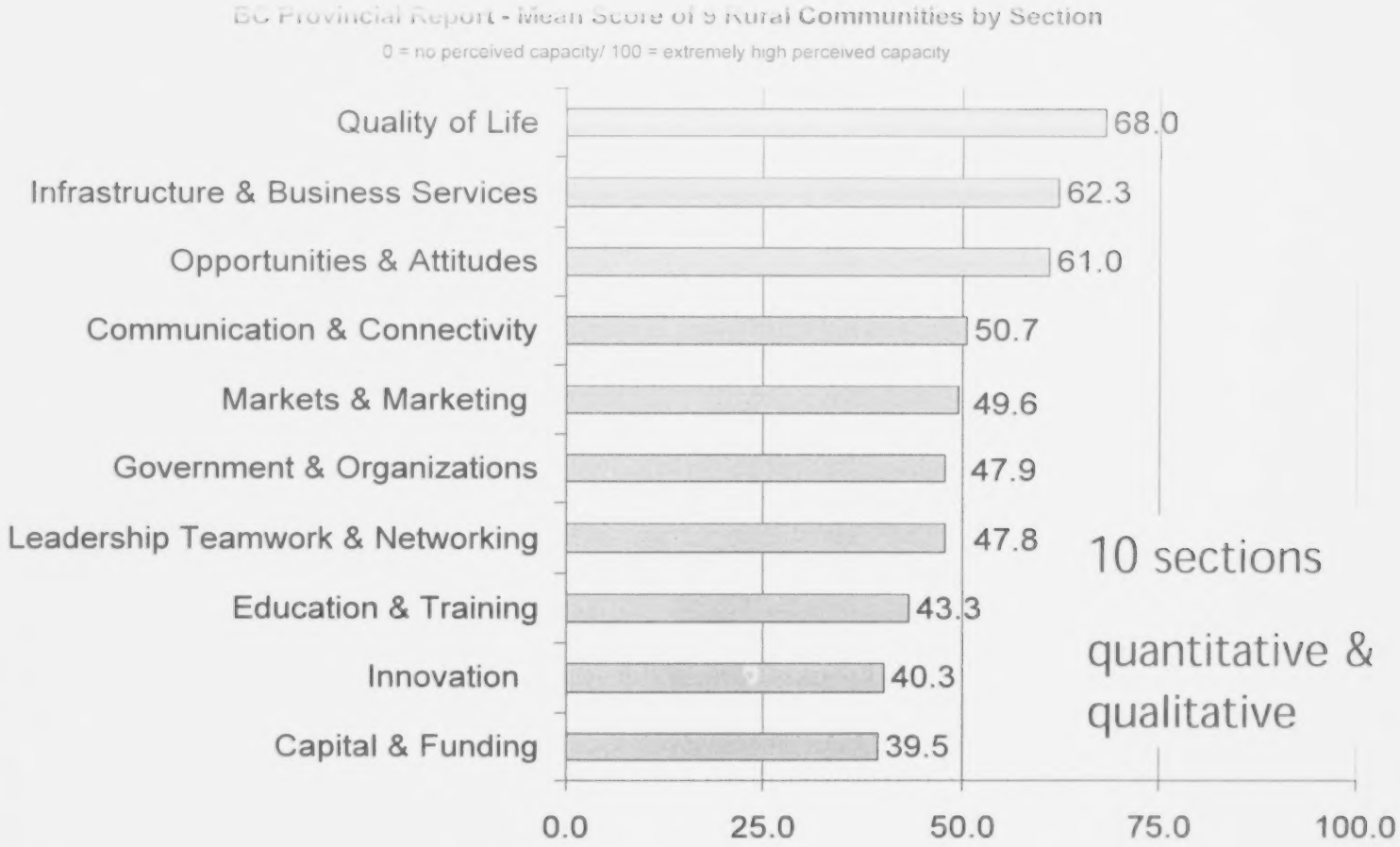
Why is entrepreneurship important in rural communities?

- Most making a transition from resource based industries
- No net job gains expected from resource or traditional manufacturing (value-added the exception)
- Pace of change increasing with globalization – Rural communities have limited capacity/staff to adapt to change – Rural entrepreneurs harness change

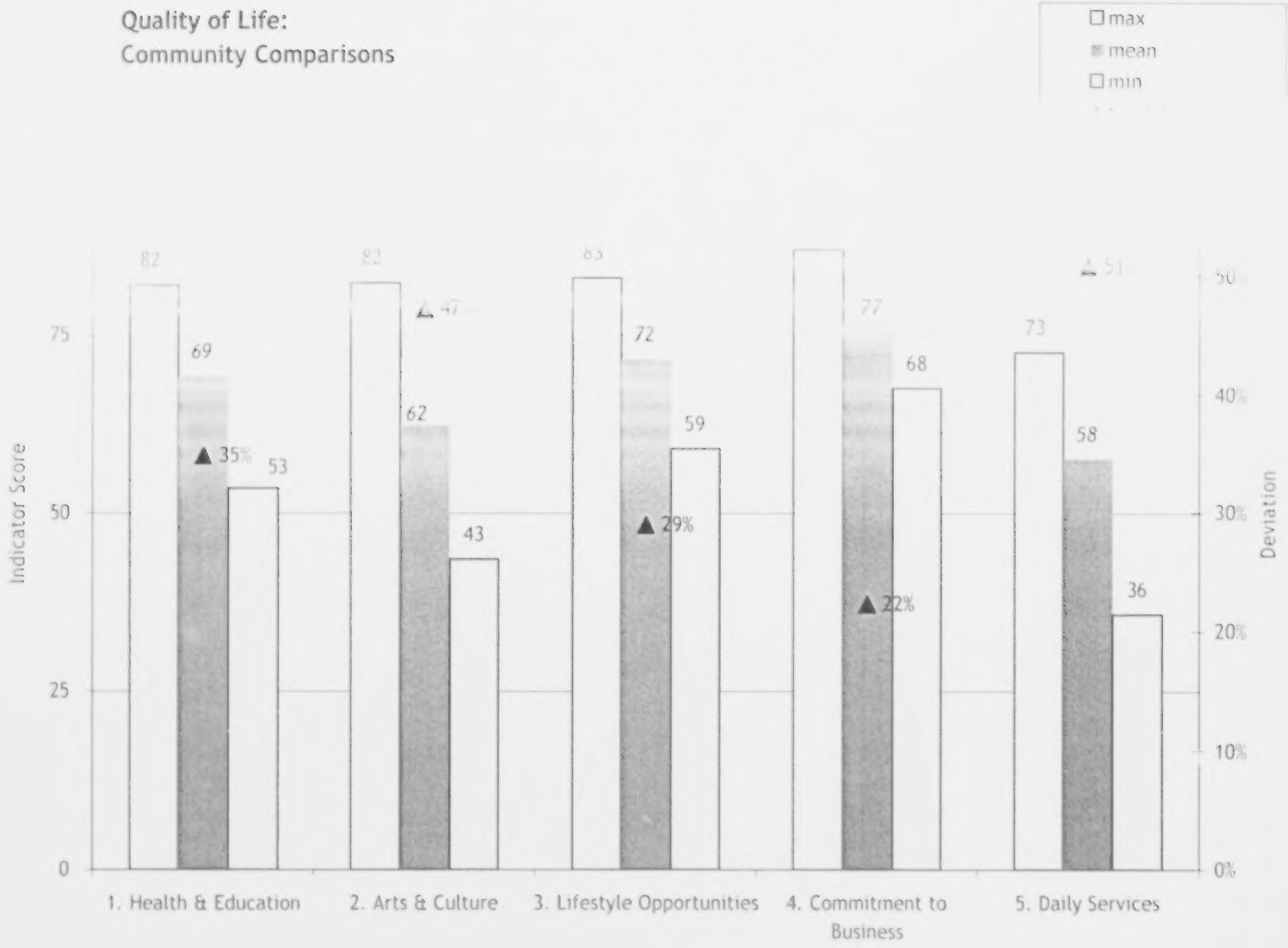
- Keeps much needed $ in community (prevents leakage)
- Entrepreneurship can provide alternatives to shrinking employment opportunities & attract youth
- Communities that are progressive with entrepreneurs are more likely to attract industry

- Conducted BVI in 9 rural BC communities ranging from 500-10,000 people over last 2 years
- 250 businesses, leaders, community members involved
- Looked for strengths & weaknesses, common issues
- Funded by Western Economic Diversification

Reading the Report - Some Key



Quality of Life:
Community Comparisons



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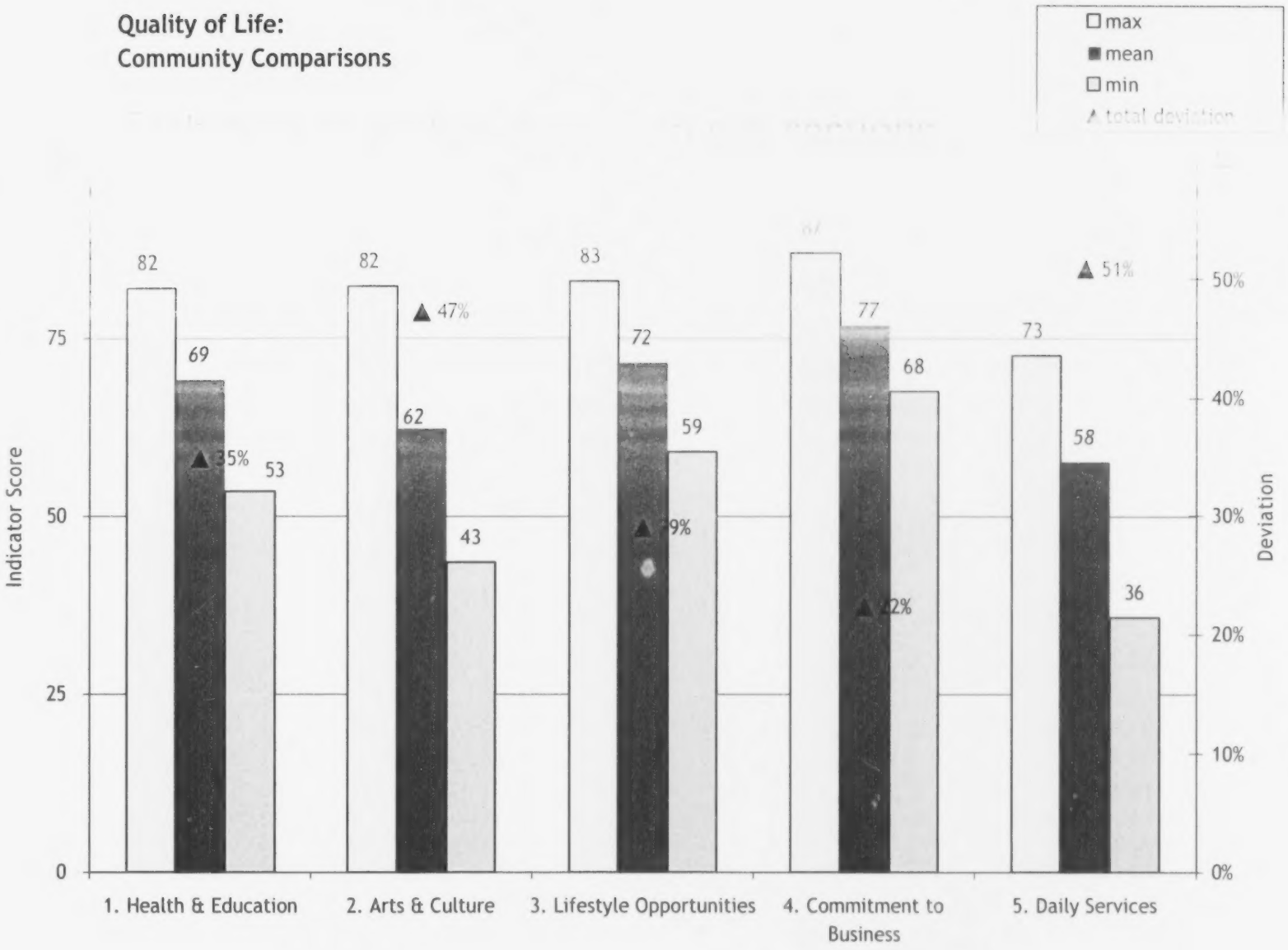

Key Findings

- **Crisis or Opportunity** – High score (84/100) in the community facing an economic crisis or significant economic opportunity
- **Overwhelmingly Positive** – 10 to 1 positives to negatives describing community - committed to community, resourceful, friendly, hard working, safe, beautiful, work together in crisis – still dwell on negative rather than assets
- **Traditional View of ED is the norm** – Low taxes, industrial park, good infrastructure seen as complete ED package
- **No Entrepreneurial Focus** – Skills, attitudes, education, role models – few recognize its potential for youth, especially attraction
- **Huge sense of community** – Most losing populations, irony in urban residents lamenting loss of community

- Desperation & Impatience – Growing sense of & need for a quick fix
- Volunteer & Leadership Burnout – Lack of leadership replenishment, Communities asked to do more
- Business Friendly Councils? – All scored high, however, not reflected in action & policy
- Small Project Success - Brought pride & sense of self-reliance (Community Forests, landfill build community)
- Tourism as the Savior? – Focused on tourism as key – many businesses felt this took away from "business" concerns

- Recognition of "Plant the seed" but... – Still fixated on landing the "big fish" without identifying assets & brand
- Senior Governments Should Pay – Belief surplus money out there
- Little Collaboration – Very little regional or even local collaboration between businesses, community groups, governments & citizens
- What About Youth? – Every community identified youth issues (entrepreneurship, migration, recreation) but few consultations or actions
- Brain Drain – Many communities losing their most educated people to bigger cities – these people are receptive to change & provide formal & informal leadership & energy

Recommendations

Grouped into three Different areas:

- Attitudes
- Opportunities
- Networking

- **Culture & Attitudes** – Enhance culture that promotes entrepreneurship – k-12, mentors, recognizing & rewarding
- **Vision** – Need to objectively assess & reassess, lay out plans, visions, targeted measures & take action
- **Change Readiness** – Switch from 'what's been lost' to 'how can we use our assets' for future growth needed – profile community & business successes
- **Youth Inclusion** – Include & engage in a meaningful way – identify opportunities in entrepreneurship, education & recreation (i.e. Nakusp opportunity identification session for youth)

- **Education** – Make use of existing community organizations, assure connection to closest post-secondary inst., responsive to local needs, improve attitude toward life-long learning & continuous skill development
- **Innovation** – Acknowledge importance of innovation within new knowledge-based economy and identify & utilize key assets as catalysts
- **Capital & Funding** – Access important, however education and mentorship also key, and consider successful alternative capitalization models

- **Cooperation** – Encourage cooperation within communities and regionally, possibly through small trust building projects
- **Leadership** – Renewed leadership through rewards, success stories, mentoring opportunities, tapping into new residents, youth, etc.
- **Networking** – Encourage through formal & informal opportunities, go beyond traditional business to business